

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1087302
Vendor Name: Office Depot
Invoice Number: 986399340001
Invoice Date: 12/06/17
PO Number: P0355298
Check Number: 0230102
Check Amount: \$ 9,247.77
Check Date: 01/17/2018
Department ID: 00465
Reviewer Name: None
Voucher Number: V0489250
Redaction Type: None
Document Type: AP Invoice

Document Below

From: no_reply_ebilledge@officedepot.com

Sent: Fri Dec 08 18:06:13 CST 2017

To: invoicing@cod.edu

CC:

Subject: Your Electronic Billing for the period 12/02/2017 to 12/08/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/02/2017 to 12/08/2017.

For questions regarding billing format, please contact billingsetup@officedepot.com.

For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:

Account Inquiries: (888) 263-3423

Order Inquiries: (800) 721-6592

Federal ID # 59-2663954

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
986399340001	\$49.99	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/06/2017	Net 30	01/07/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6

To: COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

12/21/17 - SUSAN JERAK

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		986399340001		12/04/2017		12/06/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355298				SSC3200 - Jennifer Such		SSC3200 - JENNIFER S				
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE		EXTENDED PRICE
502091 HOOKCR-SIL		RACK,COAT,SILVER 502091			EA	1	1	0	49.990		49.99

SUB-TOTAL	49.99
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	49.99

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COI G OF DUPAGE	9080291	986399340001	12/06/2017	\$49.99	

FLO 090802919 9863993400011 00000004999 1 9

PLEASE
SEND YOUR
CHECK TO:

OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1087302
Vendor Name: Office Depot
Invoice Number: 987633497001
Invoice Date: 12/08/17
PO Number: P0355370
Check Number: 0230102
Check Amount: \$ 9,247.77
Check Date: 01/17/2018
Department ID: 14225
Reviewer Name: Yvonne Bedford
Voucher Number: V0489268
Redaction Type: None
Document Type: AP Invoice

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 08 18:05:04 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/02/2017 to 12/08/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/02/2017 to 12/08/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 987508251001

Invoice Date: 12/08/17

PO Number: P0355353

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00449

Reviewer Name:

Voucher Number: V0489304

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 08 18:04:49 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/02/2017 to 12/08/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/02/2017 to 12/08/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		987508251001		12/07/2017		12/08/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355353				Tiffney Gonzalez		TIFFNEY GONZALEZ				
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE	
549014 02210		STAPLER,ELECTRIC,BLACK 549014			EA	2	2	0	26.640	53.28	
908210 54501		STAPLER,ECON,FULL STRIP, 908210			EA	4	4	0	3.610	14.44	
546871 1534G-OX		EXPANDING PKT,LETTER,5 1 546871			BX	2	2	0	7.560	15.12	
595774 50990		FILEJCKT,POLY,EXP,1",10P 595774			PK	1	1	0	8.830	8.83	
110284 UDS10-MS-P6		DUSTER,OFFICE DEPOT,100Z 110284			PK	6	6	0	22.040	132.24	
403022 TC-20		TAPE,LETTERING,BLACK/WHT 403022			PK	1	1	0	35.190	35.19	
803460 89803-18		DESKPAD,MTH,RY18,22X17,S 803460			EA	1	1	0	22.130	22.13	
399905 SP24D0018		Deskpad,M,22X17,1C,OD,RY 399905			EA	1	1	0	2.400	2.40	
664523 PM8BP2818		CALENDAR,WAL,M,RY18,BLK, 664523			EA	1	1	0	11.690	11.69	
280283 PM1702818		WALL,CAL,MTH,RY18,11X9,P 280283			EA	1	1	0	8.600	8.60	
762411 SP717D5018		REFILL,DAILY,2PPD,RY18,3 762411			EA	1	1	0	2.440	2.44	
363797 103627		Calendar,W,15x12,DNyFri, 363797			EA	1	1	0	11.040	11.04	
439833 102138		DeskPad,17x11,DL Ollie,R 439833			EA	3	3	0	8.440	25.32	
934223 589-905-18		PLANNER,WM,RY18,9X11,FLO 934223			EA	1	1	0	22.090	22.09	
816304 06591		notebook,refillable,11x8 816304			EA	1	1	0	18.990	18.99	
498811 OD498811		SHEET PROTECT,OD,STD,CLR 498811			BX	2	2	0	4.780	9.56	
305466 99401		PAD,PERF,8.5X11,OD,LGL R 305466			DZ	1	1	0	5.800	5.80	



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
987508251001	\$399.16	2 of 2
INVOICE DATE	TERMS	PAYMENT DUE
12/08/2017	Net 30	01/07/2018

Federal ID # 59-2663954

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		987508251001		12/07/2017		12/08/2017	
BILLING ID	PURCHASE ORDER		RELEASE			ORDERED BY		DESKTOP		COST CENTER	
9080291	355353					Tiffney Gonzalez		TIFFNEY GONZALEZ			
CATALOG ITEM # / MANUF CODE	DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE		EXTENDED PRICE	

ALL AMOUNTS ARE BASED ON USD CURRENCY	SUB-TOTAL	399.16
	DISCOUNT	0.00
	DELIVERY	0.00
	MISCELLANEOUS	0.00
	SALES TAX	0.00
	TOTAL	399.16

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COLG OF DUPAGE	9080291	987508251001	12/08/2017	\$399.16	

FL0 090802919 9875082510013 00000039916 1 6

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 987676574001

Invoice Date: 12/08/17

PO Number: P0355375

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00177

Reviewer Name:

Voucher Number: V0489307

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 08 18:03:44 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/02/2017 to 12/08/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/02/2017 to 12/08/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

3 WAY MATCH

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
987676574001	\$508.57	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/08/2017	Net 30	01/07/2018

Federal ID # 59-2663954

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		987676574001		12/07/2017		12/08/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355375				Jolly-McCarthy, Laurel		JOLLY- MCCARTHY, LAUR				
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #		U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE		EXTENDED PRICE	
270312 14412		PENCIL,WD CASE, YELLOW,1 270312		PK	5	5	0	9.670		48.35	
122951 394468		TAPE,DUCT,1.88"X45YD 122951		RL	23	23	0	9.990		229.77	
508569 PCTP160C100OD OM		CUPS,PLASTIC,16OZ,100CT, 508569		PK	1	1	0	13.290		13.29	
150024 GJO20004		SPORK,MWPP 150024		CT	1	1	0	17.890		17.89	
444292 48611-OD		TWINE,CUT/TIE,200' 444292		EA	1	1	0	4.190		4.19	
153731 QUA46171		STRING,10-PLY COTTON,WE 153731		EA	1	1	0	7.890		7.89	
628865 DCC12BWWQRPK		BOWL,FOAM,LMNTD,12OZ,125 628865		PK	1	1	0	5.090		5.09	
424790 TBL549BK		TABLECOVER,54X108,PLS,BK 424790		PK	1	1	0	13.990		13.99	
1388656 PC1604		Procell 9-Volt Alkaline 1388656		BX	7	7	0	19.990		139.93	
507271 SJN682257		BAGS,GALLON,ZIPLOC 507271		BX	1	1	0	28.180		28.18	

SUB-TOTAL	508.57
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	508.57

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT
COLG OF DUPAGE	9080291	987676574001	12/08/2017	\$508.57

AMOUNT ENCLOSED

FL0 090802919 9876765740018 00000050857 1 4

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1087302
Vendor Name: Office Depot
Invoice Number: 987633493001
Invoice Date: 12/08/17
PO Number: P0355369
Check Number: 0230102
Check Amount: \$ 9,247.77
Check Date: 01/17/2018
Department ID: 00433
Reviewer Name: Linda Hickman
Voucher Number: V0489310
Redaction Type: None
Document Type: AP Invoice

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 08 18:04:21 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/02/2017 to 12/08/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/02/2017 to 12/08/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1087302
Vendor Name: Office Depot
Invoice Number: 986429059001
Invoice Date: 12/07/17
PO Number: P0355300
Check Number: 0230102
Check Amount: \$ 9,247.77
Check Date: 01/17/2018
Department ID: 00821
Reviewer Name: Kristen Kepnick
Voucher Number: V0489311
Redaction Type: None
Document Type: AP Invoice

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 08 18:04:21 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/02/2017 to 12/08/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/02/2017 to 12/08/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
986429059001	\$97.59	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/07/2017	Net 30	01/07/2018

Federal ID # 59-2663954

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

APPROVED
Ship To: COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
01/08/18 - KAREN KUHN

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		986429059001		12/04/2017		12/07/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355300				Oakley, Renee		OAKLEY, RENEE				
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE		EXTENDED PRICE
734062 GA0287830		BOARD,IN-OUT,18"X24",WH 734062			EA	1	1	0	97.590		97.59

INVOICE REVIEWED
OKAY TO PAY
KRISTEN KEPNICK 12/11/17

ALL AMOUNTS ARE BASED ON USD CURRENCY	SUB-TOTAL	97.59
	DISCOUNT	0.00
	DELIVERY	0.00
	MISCELLANEOUS	0.00
	SALES TAX	0.00
	TOTAL	97.59

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲					
CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COLG OF DUPAGE	9080291	986429059001	12/07/2017	\$97.59	

FL0 090802919 9864290590017 00000009759 1 5

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1087302
Vendor Name: Office Depot
Invoice Number: 986859821001
Invoice Date: 12/06/17
PO Number: P0355322
Check Number: 0230102
Check Amount: \$ 9,247.77
Check Date: 01/17/2018
Department ID: 00373
Reviewer Name: Elizabeth Holmwood
Voucher Number: V0489313
Redaction Type: None
Document Type: AP Invoice

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 08 18:03:03 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/02/2017 to 12/08/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/02/2017 to 12/08/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1087302
Vendor Name: Office Depot
Invoice Number: 985983201001
Invoice Date: 12/05/17
PO Number: P0355291
Check Number: 0230102
Check Amount: \$ 9,247.77
Check Date: 01/17/2018
Department ID: 14625
Reviewer Name: Yvonne Bedford
Voucher Number: V0489319
Redaction Type: None
Document Type: AP Invoice

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 08 18:01:58 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/02/2017 to 12/08/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/02/2017 to 12/08/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1087302
Vendor Name: Office Depot
Invoice Number: 987542998001
Invoice Date: 12/08/17
PO Number: P0355356
Check Number: 0230102
Check Amount: \$ 9,247.77
Check Date: 01/17/2018
Department ID: 65007
Reviewer Name: Yvonne Bedford
Voucher Number: V0489320
Redaction Type: None
Document Type: AP Invoice

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 08 18:01:57 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/02/2017 to 12/08/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/02/2017 to 12/08/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1087302
Vendor Name: Office Depot
Invoice Number: 986429057001
Invoice Date: 12/05/17
PO Number: P0355300
Check Number: 0230102
Check Amount: \$ 9,247.77
Check Date: 01/17/2018
Department ID: 00821
Reviewer Name: Kristen Kepnick
Voucher Number: V0489321
Redaction Type: None
Document Type: AP Invoice

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 08 18:02:03 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/02/2017 to 12/08/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/02/2017 to 12/08/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1087302
Vendor Name: Office Depot
Invoice Number: 973444925001
Invoice Date: 12/05/17
PO Number: P0354630
Check Number: 0230102
Check Amount: \$ 9,247.77
Check Date: 01/17/2018
Department ID: 00761
Reviewer Name: None
Voucher Number: V0489430
Redaction Type: None
Document Type: AP Invoice

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 08 18:02:03 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/02/2017 to 12/08/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/02/2017 to 12/08/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 989783393001

Invoice Date: 12/14/17

PO Number: P0355449

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 14625

Reviewer Name:

Voucher Number: V0489855

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 15 20:15:49 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/09/2017 to 12/15/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/09/2017 to 12/15/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

3 WAY MATCH

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
989783393001	\$9.99	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/14/2017	Net 30	01/14/2018

Federal ID # 59-2663954

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		989783393001		12/13/2017		12/14/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355449				Pam McGowan, SRC-1111		PAM MCGOWAN, SRC-111				
CATALOG ITEM # / MANUF CODE	DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE		
523154	CLIP,PAPER,JUMBO,ASTD,50			BX	1	1	0	9.990	9.99		
2013011401	523154										

SUB-TOTAL	9.99
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	9.99

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COLG OF DUPAGE	9080291	989783393001	12/14/2017	\$9.99	

FL0 090802919 9897833930019 00000000999 1 7

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 987870345001

Invoice Date: 12/11/17

PO Number: P0355388

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00473

Reviewer Name:

Voucher Number: V0489856

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 15 20:15:49 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/09/2017 to 12/15/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/09/2017 to 12/15/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

3 WAY MATCH

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
987870345001	\$68.80	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/11/2017	Net 30	01/14/2018

Federal ID # 59-2663954

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		987870345001		12/08/2017		12/11/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355388				Mary Zelasco SSC 3258		MARY ZELASCO SSC 325				
CATALOG ITEM # / MANUF CODE	DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE		
280283 PM1702818	WALL,CAL,MTH,RY18,11X9,P 280283			EA	8	8	0	8.600	68.80		

SUB-TOTAL	68.80
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	68.80

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT
COLG OF DUPAGE	9080291	987870345001	12/11/2017	\$68.80

AMOUNT ENCLOSED

FL0 090802919 9878703450015 00000006880 1 2

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 989292661001

Invoice Date: 12/14/17

PO Number: P0355439

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 11001

Reviewer Name:

Voucher Number: V0489857

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 15 20:14:42 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/09/2017 to 12/15/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/09/2017 to 12/15/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:

Account Inquiries: (888) 263-3423

Order Inquiries: (800) 721-6592

3 WAY MATCH

Federal ID # 59-2663954

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
989292661001	\$6.10	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/14/2017	Net 30	01/14/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		989292661001		12/13/2017		12/14/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355439				Mandy Rakow, MAC 201B		MANDY RAKOW, MAC 201				
CATALOG ITEM # / MANUF CODE	DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE		
510128 RTP-024673	PENCIL,MECHANICAL,12/PK, 510128			DZ	2	2	0	3.050	6.10		

SUB-TOTAL	6.10
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	6.10

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COI G OF DUPAGE	9080291	989292661001	12/14/2017	\$6.10	

FLO 090802919 9892926610016 00000000610 1 6

PLEASE
SEND YOUR
CHECK TO:

OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 989387718001

Invoice Date: 12/14/17

PO Number: P0355452

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00097

Reviewer Name:

Voucher Number: V0489858

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 15 20:15:19 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/09/2017 to 12/15/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/09/2017 to 12/15/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:

Account Inquiries: (888) 263-3423

Order Inquiries: (800) 721-6592

3 WAY MATCH

Federal ID # 59-2663954

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
989387718001	\$62.28	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/14/2017	Net 30	01/14/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		989387718001		12/13/2017		12/14/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355452				Hickman, Linda		HICKMAN, LINDA				
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #		U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE		EXTENDED PRICE	
331789 130-06224		24" RUBBER STRAP 331789		PK	1	1	0	27.390		27.39	
790357 130-06235		35" RUBBER STRAP 790357		PK	1	1	0	34.890		34.89	

	SUB-TOTAL	62.28
	DISCOUNT	0.00
	DELIVERY	0.00
	MISCELLANEOUS	0.00
	SALES TAX	0.00
ALL AMOUNTS ARE BASED ON USD CURRENCY	TOTAL	62.28

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
CO LG OF DUPAGE	9080291	989387718001	12/14/2017	\$62.28	

FLO 090802919 9893877180017 00000006228 1 9

PLEASE
SEND YOUR
CHECK TO:

OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 989783392001

Invoice Date: 12/14/17

PO Number: P0355449

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 14625

Reviewer Name:

Voucher Number: V0489859

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 15 20:14:43 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/09/2017 to 12/15/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/09/2017 to 12/15/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

3 WAY MATCH

Federal ID # 59-2663954

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
989783392001	\$10.39	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/14/2017	Net 30	01/14/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		989783392001		12/13/2017		12/14/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355449				Pam McGowan, SRC-1111		PAM MCGOWAN, SRC-111				
CATALOG ITEM # / MANUF CODE	DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE		
526637 2013011403	CLIP,BINDER,ASTD SIZE,20 526637			BX	1	1	0	10.390	10.39		

SUB-TOTAL	10.39
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	10.39

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COLG OF DUPAGE	9080291	989783392001	12/14/2017	\$10.39	

FL0 090802919 9897833920010 00000001039 1 8

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 988903850001

Invoice Date: 12/13/17

PO Number: P0355418

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 16515

Reviewer Name:

Voucher Number: V0489860

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 15 20:13:12 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/09/2017 to 12/15/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/09/2017 to 12/15/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

3 WAY MATCH

Federal ID # 59-2663954

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
988903850001	\$4.84	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/13/2017	Net 30	01/14/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		988903850001		12/12/2017		12/13/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355418				Chuck Currier		CHUCK CURRIER				
CATALOG ITEM # / MANUF CODE	DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE		EXTENDED PRICE	
259838 CLI61217	HOLDER,CD,BUS,POLY C,11X 259838			PK	1	1	0	3.090		3.09	
173336 C38-BK	DISPENSER,TAPE,DSKTOP,3/ 173336			EA	1	1	0	1.750		1.75	

SUB-TOTAL	4.84
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	4.84

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT
COLG OF DUPAGE	9080291	988903850001	12/13/2017	\$4.84

AMOUNT ENCLOSED

FL0 090802919 9889038500010 00000000484 1 4

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 988003730001

Invoice Date: 12/11/17

PO Number: P0355397

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 15065

Reviewer Name:

Voucher Number: V0489872

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 15 20:11:41 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/09/2017 to 12/15/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/09/2017 to 12/15/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		988003730001		12/08/2017		12/11/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355397				c yearman src 2102		C YEARMAN SRC 2102				
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE		EXTENDED PRICE
344566 KCC03076		TISSUE,KLEENEX FACIAL,WE 344566			CT	3	3	0	18.870		56.61
344566 KCC03076		TISSUE,KLEENEX FACIAL,WE 344566			CT	1	1	0	18.870		18.87
975220 E5022		GLUE STICK,OFFC.,77OZ,3/ 975220			PK	1	1	0	4.590		4.59
491694 OD491694		SHEET PROT,OD,STD,CLR,20 491694			BX	1	1	0	16.900		16.90
837925 MMM3101001		EARPLUG, UNCORDED, EAR 837925			BX	1	1	0	40.690		40.69
140686 RAC84251		WIPES,DISINF,LL,80CT-3PK 140686			PK	1	1	0	15.990		15.99
307744 99473		PAD,SCRATCH,4X6,WHT,100S 307744			DZ	1	1	0	12.790		12.79
436339 MRC2930CT		TISSUE,FACIAL,FLATBX,30/ 436339			CA	2	2	0	18.120		36.24
536373 CLO15949CT		CLEANER,DSNFCT,WIPES,FRS 536373			CT	1	1	0	35.320		35.32
305466 99401		PAD,PERF,8.5X11,OD,LGL R 305466			DZ	3	3	0	5.800		17.40
172460 653YW		PAD,NTE,POST,1.5"X2",12P 172460			PK	2	2	0	4.210		8.42
181586 33211		PEN,BALL PT,MEDIUM,STICK 181586			DZ	3	3	0	1.520		4.56



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
988003730001	\$268.38	2 of 2
INVOICE DATE	TERMS	PAYMENT DUE
12/11/2017	Net 30	01/14/2018

Federal ID # 59-2663954

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		988003730001		12/08/2017		12/11/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355397				c yearman src 2102		C YEARMAN SRC 2102				
CATALOG ITEM # / MANUF CODE	DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE		

3 WAY MATCH

ALL AMOUNTS ARE BASED ON USD CURRENCY	SUB-TOTAL	268.38
	DISCOUNT	0.00
	DELIVERY	0.00
	MISCELLANEOUS	0.00
	SALES TAX	0.00
	TOTAL	268.38

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COLG OF DUPAGE	9080291	988003730001	12/11/2017	\$268.38	

FL0 090802919 9880037300015 00000026838 1 4

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 989903352001

Invoice Date: 12/15/17

PO Number: P0355468

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00153

Reviewer Name:

Voucher Number: V0489873

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 15 20:10:26 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/09/2017 to 12/15/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/09/2017 to 12/15/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 987942813001

Invoice Date: 12/11/17

PO Number: P0355391

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 15065

Reviewer Name:

Voucher Number: V0489874

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 15 20:10:26 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/09/2017 to 12/15/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/09/2017 to 12/15/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
987942813001	\$7.87	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/11/2017	Net 30	01/14/2018

Federal ID # 59-2663954

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		987942813001		12/08/2017		12/11/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355391				c yearman src 2102		C YEARMAN SRC 2102				
CATALOG ITEM # / MANUF CODE	DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE		
104222 LT91-2M-OD	PAD,DSK,12X17,RHINOLIN,M 104222			EA	1	1	0	7.870	7.87		

3 WAY MATCH

	SUB-TOTAL	7.87
	DISCOUNT	0.00
	DELIVERY	0.00
	MISCELLANEOUS	0.00
	SALES TAX	0.00
ALL AMOUNTS ARE BASED ON USD CURRENCY	TOTAL	7.87

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COLG OF DUPAGE	9080291	987942813001	12/11/2017	\$7.87	

FL0 090802919 9879428130015 00000000787 1 0

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 988557683001

Invoice Date: 12/12/17

PO Number: P0355403

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00829

Reviewer Name:

Voucher Number: V0489875

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 15 20:10:26 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/09/2017 to 12/15/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/09/2017 to 12/15/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
988557683001	\$48.19	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/12/2017	Net 30	01/14/2018

Federal ID # 59-2663954

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		988557683001		12/11/2017		12/12/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355403				Irene Pallasch SRC1010		IRENE PALLASCH SRC10				
CATALOG ITEM # / MANUF CODE	DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE		EXTENDED PRICE	
503789 TX-2411	TAPE, LETTERING, .75", BLK/ 503789			EA	1	1	0	48.190		48.19	

3 WAY MATCH

ALL AMOUNTS ARE BASED ON USD CURRENCY	SUB-TOTAL	48.19
	DISCOUNT	0.00
	DELIVERY	0.00
	MISCELLANEOUS	0.00
	SALES TAX	0.00
	TOTAL	48.19

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COLG OF DUPAGE	9080291	988557683001	12/12/2017	\$48.19	

FL0 090802919 9885576830017 00000004819 1 1

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 989292662001

Invoice Date: 12/14/17

PO Number: P0355439

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 11001

Reviewer Name:

Voucher Number: V0489876

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 15 20:09:26 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/09/2017 to 12/15/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/09/2017 to 12/15/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:

Account Inquiries: (888) 263-3423

Order Inquiries: (800) 721-6592

3 WAY MATCH

Federal ID # 59-2663954

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
989292662001	\$48.47	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/14/2017	Net 30	01/14/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		989292662001		12/13/2017		12/14/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355439				Mandy Rakow, MAC 201B		MANDY RAKOW, MAC 201				
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #		U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE		
427251 8488C- 1/ODU/ODP		STAPLER,FULL STRIP COMBO 427251		EA	2	2	0	4.770	9.54		
375931 35334		PEN,BALL,XFINE,PRECISE,P 375931		DZ	1	1	0	12.950	12.95		
543280 OD752 1/3OD752		MANILA FF,LTR,1/3 CUT 543280		BX	2	2	0	4.530	9.06		
375949 35336		PEN,BALL,XFINE,PRECISE,P 375949		DZ	1	1	0	13.930	13.93		
181594 33311		PEN,BALL PT,MEDIUM,STICK 181594		DZ	1	1	0	1.470	1.47		
181578 33111		PEN,BALL PT,MEDIUM,STICK 181578		DZ	1	1	0	1.520	1.52		

SUB-TOTAL	48.47
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	48.47

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COLG OF DUPAGE	9080291	989292662001	12/14/2017	\$48.47	

FLO 090802919 9892926620015 00000004847 1 3

PLEASE
SEND YOUR
CHECK TO:

OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 988741456001

Invoice Date: 12/13/17

PO Number: P0355415

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00241

Reviewer Name:

Voucher Number: V0489877

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 15 20:10:12 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/09/2017 to 12/15/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/09/2017 to 12/15/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
988741456001	\$233.98	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/13/2017	Net 30	01/14/2018

Federal ID # 59-2663954

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		988741456001		12/11/2017		12/13/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355415				Carrington, Robert R.		CARRINGTON, ROBERT R				
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE		EXTENDED PRICE
321182 EVE529CT		BATTERY, ALKA, LANTRN, 6V, E 321182			CT	2	2	0	116.990		233.98

3 WAY MATCH

	SUB-TOTAL	233.98
	DISCOUNT	0.00
	DELIVERY	0.00
	MISCELLANEOUS	0.00
	SALES TAX	0.00
ALL AMOUNTS ARE BASED ON USD CURRENCY	TOTAL	233.98

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COLG OF DUPAGE	9080291	988741456001	12/13/2017	\$233.98	

FL0 090802919 9887414560012 00000023398 1 9

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 989784672001

Invoice Date: 12/14/17

PO Number: P0355450

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 65004

Reviewer Name:

Voucher Number: V0489878

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com

Sent: Fri Dec 15 20:07:38 CST 2017

To: invoicing@cod.edu

CC:

Subject: Your Electronic Billing for the period 12/09/2017 to 12/15/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/09/2017 to 12/15/2017.

For questions regarding billing format, please contact billingsetup@officedepot.com.

For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

3 WAY MATCH

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
989784672001	\$141.47	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/14/2017	Net 30	01/14/2018

Federal ID # 59-2663954

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		989784672001		12/13/2017		12/14/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355450				Becky Bahr-HSTI		BECKY BAHR-HSTI				
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE		EXTENDED PRICE
409185 00941		DOORSTOP,BIG FOOT,GREY 409185			EA	6	6	0	2.640		15.84
810838 OM97182/810838 O		FOLDER,LTR,1/3CUT,100BX, 810838			BX	2	2	0	5.460		10.92
7881526 116253 OD		Folder Ltr1/3 100 Bx 7881526			BX	1	1	0	12.880		12.88
322740 654-AST		NOTES,POST-IT,3X3,DOZ,AS 322740			DZ	1	1	0	13.010		13.01
203349 30001		MARKER,SHARPIE,FINE,DZ,B 203349			DZ	2	2	0	8.100		16.20
754871 38201		MARKER,CHISEL,SHARPIE,BL 754871			DZ	2	2	0	8.220		16.44
475742 MMM260018A		MASKING TAPE, 0.75" x 21 475742			PK	1	1	0	22.290		22.29
173336 C38-BK		DISPENSER,TAPE,DSKTOP,3/ 173336			EA	2	2	0	1.750		3.50
127270 C1029ODX3/ODU/ O		STAPLE,REMOVER,3/PK ASSR 127270			PK	1	1	0	1.590		1.59
450343 65940		PEN,UNIBALL,GEL,RT,DZ,BL 450343			DZ	2	2	0	14.400		28.80

SUB-TOTAL	141.47
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	141.47
ALL AMOUNTS ARE BASED ON USD CURRENCY	

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COLG OF DUPAGE	9080291	989784672001	12/14/2017	\$141.47	

FL0 090802919 9897846720019 00000014147 1 5

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 988078771001

Invoice Date: 12/12/17

PO Number: P0355386

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00473

Reviewer Name:

Voucher Number: V0489880

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 15 20:07:39 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/09/2017 to 12/15/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/09/2017 to 12/15/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

3 WAY MATCH

Federal ID # 59-2663954

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
988078771001	\$7.99	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/12/2017	Net 30	01/14/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		988078771001		12/08/2017		12/12/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355386				Mary Zelasco SSC 3258		MARY ZELASCO SSC 325				
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE		EXTENDED PRICE
792630 21102		TRAY,LEGAL,BLACK 792630			EA	1	1	0	7.990		7.99

SUB-TOTAL	7.99
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	7.99

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT
COLG OF DUPAGE	9080291	988078771001	12/12/2017	\$7.99

AMOUNT ENCLOSED

FL0 090802919 9880787710017 00000000799 1 6

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 989903357001

Invoice Date: 12/15/17

PO Number: P0355468

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00153

Reviewer Name:

Voucher Number: V0489882

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com

Sent: Fri Dec 15 20:07:41 CST 2017

To: invoicing@cod.edu

CC:

Subject: Your Electronic Billing for the period 12/09/2017 to 12/15/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/09/2017 to 12/15/2017.

For questions regarding billing format, please contact billingsetup@officedepot.com.

For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

3 WAY MATCH

Federal ID # 59-2663954

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
989903357001	\$7.47	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/15/2017	Net 30	01/14/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		989903357001		12/14/2017		12/15/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355468				Fisk, Cindy		FISK, CINDY				
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE		EXTENDED PRICE
Instructions: 212221 OD03290		Please label pkg. Attn: Cindy Fisk HSC1122 BINDER,INP,VW,DR,2",PURP 212221			EA	1	1	0	7.470		7.47

	SUB-TOTAL	7.47
	DISCOUNT	0.00
	DELIVERY	0.00
	MISCELLANEOUS	0.00
	SALES TAX	0.00
ALL AMOUNTS ARE BASED ON USD CURRENCY	TOTAL	7.47

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COLG OF DUPAGE	9080291	989903357001	12/15/2017	\$7.47	

FL0 090802919 9899033570017 00000000747 1 6

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 988780362001

Invoice Date: 12/12/17

PO Number: P0355416

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00461

Reviewer Name:

Voucher Number: V0489884

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 15 20:07:39 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/09/2017 to 12/15/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/09/2017 to 12/15/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

3 WAY MATCH

Federal ID # 59-2663954

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
988780362001	\$107.99	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/12/2017	Net 30	01/14/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		988780362001		12/11/2017		12/12/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355416				Christine Jandak SSC 2221		CHRISTINE JANDAK SSC				
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE		EXTENDED PRICE
806081 B343A		BOARD,BULTN,FOAM,PRES,3X 806081			EA	1	1	0	107.990		107.99

SUB-TOTAL	107.99
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	107.99

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COLG OF DUPAGE	9080291	988780362001	12/12/2017	\$107.99	

FL0 090802919 9887803620013 00000010799 1 1

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 988557684001

Invoice Date: 12/12/17

PO Number: P0355403

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00829

Reviewer Name:

Voucher Number: V0489886

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 15 20:05:42 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/09/2017 to 12/15/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/09/2017 to 12/15/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

3 WAY MATCH

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
988557684001	\$16.88	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/12/2017	Net 30	01/14/2018

Federal ID # 59-2663954

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		988557684001		12/11/2017		12/12/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355403				Irene Pallasch SRC1010		IRENE PALLASCH SRC10				
CATALOG ITEM # / MANUF CODE	DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE		EXTENDED PRICE	
182733 8420152	PEN,FLAIR,W/POINTGUARD,D 84201			DZ	1	1	0	12.990		12.99	
687398 E623	GLUESTICK,REPOSITIONABLE 687398			EA	1	1	0	3.890		3.89	

SUB-TOTAL	16.88
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	16.88

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COLG OF DUPAGE	9080291	988557684001	12/12/2017	\$16.88	

FL0 090802919 9885576840016 00000001688 1 5

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 989888989001

Invoice Date: 12/15/17

PO Number: P0355465

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 15240

Reviewer Name:

Voucher Number: V0489887

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 15 20:05:45 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/09/2017 to 12/15/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/09/2017 to 12/15/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 989783391001

Invoice Date: 12/14/17

PO Number: P0355449

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 14625

Reviewer Name:

Voucher Number: V0489888

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 15 20:05:42 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/09/2017 to 12/15/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/09/2017 to 12/15/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:

Account Inquiries: (888) 263-3423

Order Inquiries: (800) 721-6592

3 WAY MATCH

Federal ID # 59-2663954

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
989783391001	\$8.54	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/14/2017	Net 30	01/14/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		989783391001		12/13/2017		12/14/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355449				Pam McGowan, SRC-1111		PAM MCGOWAN, SRC-111				
CATALOG ITEM # / MANUF CODE	DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE		
672486 10770	FOLDER,DIVIDEITUP,LTR,24 672486			PK	1	1	0	8.540	8.54		

SUB-TOTAL	8.54
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	8.54

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COI G OF DUPAGE	9080291	989783391001	12/14/2017	\$8.54	

FLO 090802919 9897833910011 00000000854 1 2

PLEASE
SEND YOUR
CHECK TO:

OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 988741454001

Invoice Date: 12/12/17

PO Number: P0355415

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00241

Reviewer Name:

Voucher Number: V0489890

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 15 20:05:58 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/09/2017 to 12/15/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/09/2017 to 12/15/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

3 WAY MATCH

Federal ID # 59-2663954

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
988741454001	\$188.51	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/12/2017	Net 30	01/14/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		988741454001		12/11/2017		12/12/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355415				Carrington, Robert R.		CARRINGTON, ROBERT R				
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #		U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE		EXTENDED PRICE	
128791 SMP50128		REMOVER,LIME SCALE,1GAL 128791		EA	1	1	0	14.590		14.59	
135556 JELKITCHEN32PRO		CLEANER,CLR,KITCHEN,32OZ 135556		CT	1	1	0	59.990		59.99	
863200 88081		PEN,GRIP,WB,MED,DZ,RED 863200		DZ	3	3	0	2.790		8.37	
741955 DUR01501		BATTERY,COPPERTP,AA,24/B 741955		BX	4	4	0	26.390		105.56	

SUB-TOTAL	188.51
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	188.51

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COLG OF DUPAGE	9080291	988741454001	12/12/2017	\$188.51	

FL0 090802919 9887414540014 00000018851 1 0

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 989903351001

Invoice Date: 12/15/17

PO Number: P0355468

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00153

Reviewer Name:

Voucher Number: V0489891

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 15 20:06:00 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/09/2017 to 12/15/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/09/2017 to 12/15/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

3 WAY MATCH

Federal ID # 59-2663954

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
989903351001	\$23.84	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/15/2017	Net 30	01/14/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER	SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office	99		989903351001		12/14/2017		12/15/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER	
9080291	355468				Fisk, Cindy		FISK, CINDY			
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #		U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE		EXTENDED PRICE
Instructions: 394925 123434		Please label pkg. Attn: Cindy Fisk HSC1122 PAPER,OD,MULTI,GLOSS,100 394925		PK	2	2	0	11.920		23.84

	SUB-TOTAL	23.84
	DISCOUNT	0.00
	DELIVERY	0.00
	MISCELLANEOUS	0.00
	SALES TAX	0.00
ALL AMOUNTS ARE BASED ON USD CURRENCY	TOTAL	23.84

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COLG OF DUPAGE	9080291	989903351001	12/15/2017	\$23.84	

FL0 090802919 9899033510013 00000002384 1 2

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 989681646001

Invoice Date: 12/15/17

PO Number: P0355464

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 15065

Reviewer Name:

Voucher Number: V0489894

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 15 20:03:31 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/09/2017 to 12/15/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/09/2017 to 12/15/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

3 WAY MATCH

Federal ID # 59-2663954

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
989681646001	\$101.91	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/15/2017	Net 30	01/14/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		989681646001		12/14/2017		12/15/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355464				c yearman src 2102		C YEARMAN SRC 2102				
CATALOG ITEM # / MANUF CODE	DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE		
803460 89803-18	DESKPAD,MTH,RY18,22X17,S 803460			EA	1	1	0	22.130	22.13		
428468 R330-12SSCY	NOTE,POST-IT,POP-UP,SS,1 428468			PK	3	3	0	10.920	32.76		
308220 KCC34790	WIPER,HD,88007X60 WYPALL 308220			BX	1	1	0	6.260	6.26		
184624 NUD38020	HOLDER,T-SIGN,8.5"X11",A 184624			EA	4	4	0	10.190	40.76		

SUB-TOTAL	101.91
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	101.91

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COLG OF DUPAGE	9080291	989681646001	12/15/2017	\$101.91	

FL0 090802919 9896816460010 00000010191 1 5

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 987942814001

Invoice Date: 12/11/17

PO Number: P0355391

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 15065

Reviewer Name:

Voucher Number: V0489896

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 15 20:03:30 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/09/2017 to 12/15/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/09/2017 to 12/15/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

3 WAY MATCH

Federal ID # 59-2663954

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
987942814001	\$9.51	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/11/2017	Net 30	01/14/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		987942814001		12/08/2017		12/11/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355391				c yearman src 2102		C YEARMAN SRC 2102				
CATALOG ITEM # / MANUF CODE	DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE		EXTENDED PRICE	
115872 PGC82027CT	MR CLEAN MAGIC ERASER,4/ 115872			BX	1	1	0	4.300		4.30	
491658 OD491658	SHEET PROT,OD,HVY,CLR,10 491658			BX	1	1	0	5.210		5.21	

ALL AMOUNTS ARE BASED ON USD CURRENCY	SUB-TOTAL	9.51
	DISCOUNT	0.00
	DELIVERY	0.00
	MISCELLANEOUS	0.00
	SALES TAX	0.00
	TOTAL	9.51

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COLG OF DUPAGE	9080291	987942814001	12/11/2017	\$9.51	

FL0 090802919 9879428140014 00000000951 1 1

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 988780363001

Invoice Date: 12/12/17

PO Number: P0355416

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00461

Reviewer Name:

Voucher Number: V0489899

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com

Sent: Fri Dec 15 20:04:00 CST 2017

To: invoicing@cod.edu

CC:

Subject: Your Electronic Billing for the period 12/09/2017 to 12/15/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/09/2017 to 12/15/2017.

For questions regarding billing format, please contact billingsetup@officedepot.com.

For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:

Account Inquiries: (888) 263-3423

Order Inquiries: (800) 721-6592

3 WAY MATCH

Federal ID # 59-2663954

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
988780363001	\$36.38	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/12/2017	Net 30	01/14/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		988780363001		12/11/2017		12/12/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355416				Christine Jandak SSC 2221		CHRISTINE JANDAK SSC				
CATALOG ITEM # / MANUF CODE	DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE		
240812 31225346U	FOLDER,GLOSSY,BABY BLUE 240812			PK	2	2	0	18.190	36.38		

SUB-TOTAL	36.38
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	36.38

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COI G OF DUPAGE	9080291	988780363001	12/12/2017	\$36.38	

FLO 090802919 9887803630012 00000003638 1 1

PLEASE
SEND YOUR
CHECK TO:

OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 988780361001

Invoice Date: 12/12/17

PO Number: P0355416

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00461

Reviewer Name:

Voucher Number: V0489900

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 15 20:00:42 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/09/2017 to 12/15/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/09/2017 to 12/15/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:

Account Inquiries: (888) 263-3423

Order Inquiries: (800) 721-6592

3 WAY MATCH

Federal ID # 59-2663954

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
988780361001	\$219.47	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/12/2017	Net 30	01/14/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		988780361001		12/11/2017		12/12/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355416				Christine Jandak SSC 2221		CHRISTINE JANDAK SSC				
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #		U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE		EXTENDED PRICE	
738371 RUB11916ROS	ORGANIZER,DRAWER,HANGING 738371		EA	1	1	0	12.590	12.59			
583864 ALL00700	RUBBERBAND,BIG BAND PACK 583864		PK	4	4	0	2.490	9.96			
393770 680-RD12	FLAGS,POST-IT,RED,12PK 393770		BX	1	1	0	15.350	15.35			
180366 OD-3312PA	NOTES,POPOP,OD,12PK,ASTD 180366		PK	1	1	0	6.460	6.46			
409185 00941	DOORSTOP,BIG FOOT,GREY 409185		EA	4	4	0	2.640	10.56			
635287 ACM15454	SCISSORS,8" TI NSTK,3/PK 635287		PK	2	2	0	44.990	89.98			
283583 36620	PUSHPINS,BALL,SJW,50PK,B 283583		PK	1	1	0	3.990	3.99			
266648 40110	PEN,GEL,UB 207,8PK,ASTD 266648		PK	2	2	0	10.290	20.58			
525112 33950	PEN,GEL,UNIBALL,.7MM,12/ 525112		DZ	2	2	0	14.130	28.26			
823213 24415	HIGHLIGHTER,ACCENT,10CT, 823213		PK	1	1	0	8.850	8.85			
839815 SPR26374	FILE,DESK,"THE FOLDER"-E 839815		EA	1	1	0	12.890	12.89			

SUB-TOTAL	219.47
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	219.47

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COIG OF DUPAGE	9080291	988780361001	12/12/2017	\$219.47	

FLO

09080291.9 988780361.0014 00000021.947 1. 9

PLEASE
SEND YOUR
CHECK TO:

OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 988044497001

Invoice Date: 12/11/17

PO Number: P0355401

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00463

Reviewer Name:

Voucher Number: V0489902

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 15 20:00:43 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/09/2017 to 12/15/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/09/2017 to 12/15/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 988549310001

Invoice Date: 12/12/17

PO Number: P0355402

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00757

Reviewer Name:

Voucher Number: V0489903

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 15 20:00:43 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/09/2017 to 12/15/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/09/2017 to 12/15/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:

Account Inquiries: (888) 263-3423

Order Inquiries: (800) 721-6592

3 WAY MATCH

Federal ID # 59-2663954

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
988549310001	\$13.14	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/12/2017	Net 30	01/14/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

Ship To : COLLEGE OF DUPAGE SHIPPING
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		988549310001		12/11/2017		12/12/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355402				Greenbusch, Heather		GREENBUSCH, HEATHER				
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #		U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE		EXTENDED PRICE	
698878 OD698878		COVER,PORTFOLIO,11.75X9. 698878		BX	2	2	0	6.570		13.14	

	SUB-TOTAL	13.14
	DISCOUNT	0.00
	DELIVERY	0.00
	MISCELLANEOUS	0.00
	SALES TAX	0.00
ALL AMOUNTS ARE BASED ON USD CURRENCY	TOTAL	13.14

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COLG OF DUPAGE	9080291	988549310001	12/12/2017	\$13.14	

FLO 090802919 9885493100015 00000001314 1 2

PLEASE
SEND YOUR
CHECK TO:

OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 987749409001

Invoice Date: 12/11/17

PO Number: P0355385

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00457

Reviewer Name:

Voucher Number: V0489904

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 15 19:58:40 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/09/2017 to 12/15/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/09/2017 to 12/15/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

3 WAY MATCH

Federal ID # 59-2663954

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
987749409001	\$5.87	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/11/2017	Net 30	01/14/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		987749409001		12/07/2017		12/11/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355385				Salazar, Emmanuel		SALAZAR, EMMANUEL				
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE		EXTENDED PRICE
806873 KC-421		CALCULATOR,12 DIGIT,SM,D 806873			EA	1	1	0	5.870		5.87

SUB-TOTAL	5.87
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	5.87

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT
COLG OF DUPAGE	9080291	987749409001	12/11/2017	\$5.87

AMOUNT ENCLOSED

FL0 090802919 9877494090014 00000000587 1 7

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 989903353001

Invoice Date: 12/15/17

PO Number: P0355468

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00153

Reviewer Name:

Voucher Number: V0489915

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 15 20:05:47 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/09/2017 to 12/15/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/09/2017 to 12/15/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

3 WAY MATCH

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
989903353001	\$58.40	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/15/2017	Net 30	01/14/2018

Federal ID # 59-2663954

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER	SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office	99		989903353001		12/14/2017		12/15/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER	
9080291	355468				Fisk, Cindy		FISK, CINDY			
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #		U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE	

Instructions: Please label pkg. Attn: Cindy Fisk HSC1122
434415 BOARD,DISPLAY,TRFLD,36X4 EA 20 20 0 2.920 58.40
434415 434415

	SUB-TOTAL	58.40
	DISCOUNT	0.00
	DELIVERY	0.00
	MISCELLANEOUS	0.00
	SALES TAX	0.00
ALL AMOUNTS ARE BASED ON USD CURRENCY	TOTAL	58.40

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COLG OF DUPAGE	9080291	989903353001	12/15/2017	\$58.40	

FL0 090802919 9899033530011 00000005840 1 3

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 989784673001

Invoice Date: 12/14/17

PO Number: P0355450

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 65004

Reviewer Name:

Voucher Number: V0489916

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 15 20:02:56 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/09/2017 to 12/15/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/09/2017 to 12/15/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

3 WAY MATCH

Federal ID # 59-2663954

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
989784673001	\$44.98	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/14/2017	Net 30	01/14/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		989784673001		12/13/2017		12/14/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355450				Becky Bahr-HSTI		BECKY BAHR-HSTI				
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE		EXTENDED PRICE
559908 654-14YWM		NOTE,POST-IT,3X3,AST 559908			PK	2	2	0	22.490		44.98

SUB-TOTAL	44.98
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	44.98

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT
COLG OF DUPAGE	9080291	989784673001	12/14/2017	\$44.98

AMOUNT ENCLOSED

FL0 090802919 9897846730018 00000004498 1 1

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 989888990001

Invoice Date: 12/15/17

PO Number: P0355465

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 15240

Reviewer Name:

Voucher Number: V0489917

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 15 20:04:01 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/09/2017 to 12/15/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/09/2017 to 12/15/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:

Account Inquiries: (888) 263-3423

Order Inquiries: (800) 721-6592

3 WAY MATCH

Federal ID # 59-2663954

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
989888990001	\$11.69	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/15/2017	Net 30	01/14/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		989888990001		12/14/2017		12/15/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355465				Haines, Nancy - Library		HAINES, NANCY - LIBR				
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE	
362244 SK38-704-18		DESKPAD,MTH,22X17,BTDY,R 362244			EA	1	1	0	11.690	11.69	

SUB-TOTAL	11.69
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	11.69

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COLG OF DUPAGE	9080291	989888990001	12/15/2017	\$11.69	

FL0 090802919 9898889900013 00000001169 1 9

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 985128686001

Invoice Date: 12/12/17

PO Number: P0355226

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 11001

Reviewer Name:

Voucher Number: V0490251

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 15 20:12:16 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/09/2017 to 12/15/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/09/2017 to 12/15/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

3 WAY MATCH

Federal ID # 59-2663954

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
985128686001	\$181.99	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/12/2017	Net 30	01/14/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		985128686001		11/29/2017		12/12/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355226				Mandy Rakow, MAC 201B		MANDY RAKOW, MAC 201				
CATALOG ITEM # / MANUF CODE	DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE		
878742 CH025A	PAPER,MATTE POLY,42X100 CH025A			CT	1	1	0	181.990	181.99		

SUB-TOTAL	181.99
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	181.99

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT
COLG OF DUPAGE	9080291	985128686001	12/12/2017	\$181.99

AMOUNT ENCLOSED

FL0 090802919 9851286860017 00000018199 1 0

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1087302
Vendor Name: Office Depot
Invoice Number: 987213110001
Invoice Date: 12/11/17
PO Number: P0355339
Check Number: 0230102
Check Amount: \$ 9,247.77
Check Date: 01/17/2018
Department ID: 00081
Reviewer Name: Anna Gay
Voucher Number: V0490252
Redaction Type: None
Document Type: AP Invoice

Document Below

From: no_reply_ebilledge@officedepot.com

Sent: Fri Dec 15 20:11:11 CST 2017

To: invoicing@cod.edu

CC:

Subject: Your Electronic Billing for the period 12/09/2017 to 12/15/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/09/2017 to 12/15/2017.

For questions regarding billing format, please contact billingsetup@officedepot.com.

For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

**INVOICE REVIEWED
OKAY TO PAY
ANNA GAY 12/21/**

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1087302
Vendor Name: Office Depot
Invoice Number: 989825858001
Invoice Date: 12/15/17
PO Number: P0355451
Check Number: 0230102
Check Amount: \$ 9,247.77
Check Date: 01/17/2018
Department ID: 00049
Reviewer Name: Anna Gay
Voucher Number: V0490253
Redaction Type: None
Document Type: AP Invoice

Document Below

From: no_reply_ebilledge@officedepot.com

Sent: Fri Dec 15 20:11:11 CST 2017

To: invoicing@cod.edu

CC:

Subject: Your Electronic Billing for the period 12/09/2017 to 12/15/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/09/2017 to 12/15/2017.

For questions regarding billing format, please contact billingsetup@officedepot.com.

For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:

Account Inquiries: (888) 263-3423

Order Inquiries: (800) 721-6592

Federal ID # 59-2663954

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
989825858001	\$68.78	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/15/2017	Net 30	01/14/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6593

Ship To: COLLEGE OF DUPAGE ADDISON
311 S SWIFT RD
ADDISON IL 60101-1495

Ship To: COLLEGE OF DUPAGE ADDISON
336 SWIFT RD
ADDISON IL 60101-1495

APPROVED

12/21/17 - CHARLES BOONE

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		40		989825858001		12/13/2017		12/15/2017	
BILLING ID		PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER	
9080291		355451				Trinidad, Tina		TRINIDAD, TINA			
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #		U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE		EXTENDED PRICE	
410538 GJO99737		DETERGENT,LAUNDRY,PWDRD, 410538		EA	2	2	0	34.390		68.78	

**INVOICE REVIEWED
OKAY TO PAY
ANNA GAY 12/21/**

ALL AMOUNTS ARE BASED ON USD CURRENCY

SUB TOTAL	68.78
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	68.78

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COLG OF DUPAGE	9080291	989825858001	12/15/2017	\$68.78	

FLO 090802919 9898258580016 00000006878 1 8

PLEASE
SEND YOUR
CHECK TO:

OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1087302
Vendor Name: Office Depot
Invoice Number: 989064296001
Invoice Date: 12/13/17
PO Number: P0355434
Check Number: 0230102
Check Amount: \$ 9,247.77
Check Date: 01/17/2018
Department ID: 14005
Reviewer Name: Elizabeth Holmwood
Voucher Number: V0490254
Redaction Type: None
Document Type: AP Invoice

Document Below

From: no_reply_ebilledge@officedepot.com

Sent: Fri Dec 15 20:07:14 CST 2017

To: invoicing@cod.edu

CC:

Subject: Your Electronic Billing for the period 12/09/2017 to 12/15/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/09/2017 to 12/15/2017.

For questions regarding billing format, please contact billingsetup@officedepot.com.

For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		06		989064296001		12/12/2017		12/13/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355434				Maureen Mitacek/ADC		MAUREEN MITACEK/ADC				
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE	
553874 E9195018	DESK,CAL,RFL,DY,RY18,3X4			EA	1	1	0		9.580	9.58	
717033 89702-18	DESKPAD,M,RY18,22X17,BUR			EA	3	3	0		13.250	39.75	
208009 53LOR	FOLDER,FILE,LTR,1/3,ORA			BX	1	1	0		19.990	19.99	
208041 53LY	FOLDER,LTR,1/3CUT,100BX,			BX	1	1	0		9.650	9.65	
391461 53LNY	FOLDER,LTR,11PT,1/3CUT,N			BX	1	1	0		19.990	19.99	
207951 53LGN	FOLDER,LTR,1/3CUT,100BX,			BX	1	1	0		9.680	9.68	
315515 153L	FOLDER,LTR,1/3CUT,100BX,			BX	1	1	0		10.590	10.59	
208025 53LR	FOLDER,LTR,1/3CUT,100BX,			BX	1	1	0		9.680	9.68	
524912 88102/85580	PEN,BP,RT,MED,FLXGRIP,12			DZ	1	1	0		9.770	9.77	
717321 686-RYB	TAB,POST-IT,DURABLE,3/PK			PK	2	2	0		4.370	8.74	
335194 686-VAD1	TAB,PSTIT,1"&2",BONUS,7P			PK	2	2	0		4.910	9.82	
545487 686-ROYGB	TABS,DURABLE,2",30PK,AST			PK	1	1	0		4.490	4.49	
920919 686L-APV	Tabs,Durabl,1"x1.5",AQ,P			PK	1	1	0		5.590	5.59	
655324 74732	STAPLER,747 BUSINESS,BLA			EA	5	5	0		12.170	60.85	
173336 C38-BK	DISPENSER,TAPE,DSKTOP,3/			EA	8	8	0		1.750	14.00	
352106 812-10P-C38	Tape,Invis,Greener,FreeD			PK	1	1	0		18.350	18.35	
319130 CPC03562	SOAP,SFT,CRISPCLN,11.25O			EA	2	2	0		3.290	6.58	
242342 42906	DETERGENT,DISH,ANTIBAC			EA	1	1	0		6.590	6.59	
767322 ITW91930	WIPES,CLEANER,SS,LBL			EA	1	1	0		11.890	11.89	
821808 CLO15949EA	WIPES,DISINFECTANT,COLOR			EA	6	6	0		5.150	30.90	
621025 RTP-009116-OP-0	BADGE,ID,FAUX LEATHER,BL			EA	5	5	0		5.290	26.45	
259251 80001	MARKER,CHISEL TIP,EXPO,D			DZ	1	1	0		12.070	12.07	
307512 81505	ERASER,DRY ERASE,EXPO			EA	6	6	0		2.060	12.36	
823184 KCC21200	KLEENEX,BOUTIQUE,BUNDLE			PK	4	4	0		4.520	18.08	
327850 3842-4	TAPE,TEAR BY HAND, 4PK,C			PK	1	1	0		24.990	24.99	



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
989064296001	\$417.38	2 of 2
INVOICE DATE	TERMS	PAYMENT DUE
12/13/2017	Net 30	01/14/2018

Federal ID # 59-2663954

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

APPROVED

Ship To: COLLEGE OF DUPAGE ADDISON
301 S SWIFT RD
ADDISON IL 60101-1495

12/22/17 - ANDREA LIEDTKE

ACCOUNT NUMBER		ACCOUNT MANAGER	SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office	06		989064296001		12/12/2017		12/13/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER	
9080291	355434				Maureen Mitacek/ADC		MAUREEN MITACEK/ADC			
CATALOG ITEM # / MANUF CODE	DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE	
903978 QE519BP2-K6	PENCIL,MECH.9MM,LRG ERAS 903978			PK	1	1	0	6.950	6.95	

**INVOICE REVIEWED
OKAY TO PAY**

ELIZABETH HOLMWOOD 12/22/17

	SUB-TOTAL	417.38
	DISCOUNT	0.00
	DELIVERY	0.00
	MISCELLANEOUS	0.00
	SALES TAX	0.00
ALL AMOUNTS ARE BASED ON USD CURRENCY	TOTAL	417.38

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COLG OF DUPAGE	9080291	989064296001	12/13/2017	\$417.38	

FL0 090802919 9890642960012 00000041738 1 7

PLEASE
SEND YOUR
CHECK TO:

OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1087302
Vendor Name: Office Depot
Invoice Number: 989825857001
Invoice Date: 12/14/17
PO Number: P0355451
Check Number: 0230102
Check Amount: \$ 9,247.77
Check Date: 01/17/2018
Department ID: 00049
Reviewer Name: Anna Gay
Voucher Number: V0490255
Redaction Type: None
Document Type: AP Invoice

Document Below

From: no_reply_ebilledge@officedepot.com

Sent: Fri Dec 15 20:07:12 CST 2017

To: invoicing@cod.edu

CC:

Subject: Your Electronic Billing for the period 12/09/2017 to 12/15/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/09/2017 to 12/15/2017.

For questions regarding billing format, please contact billingsetup@officedepot.com.

For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1087302
Vendor Name: Office Depot
Invoice Number: 989064298001
Invoice Date: 12/13/17
PO Number: P0355434
Check Number: 0230102
Check Amount: \$ 9,247.77
Check Date: 01/17/2018
Department ID: 14005
Reviewer Name: Elizabeth Holmwood
Voucher Number: V0490256
Redaction Type: None
Document Type: AP Invoice

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 15 20:04:01 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/09/2017 to 12/15/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/09/2017 to 12/15/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
989064298001	\$8.79	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/13/2017	Net 30	01/14/2018

Federal ID # 59-2663954

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FA VELL BLVD
GLEN ELLYN IL 60137-6395

APPROVED

Pay To: COLLEGE OF DUPAGE ADDISON
301 S SWIFT RD
ADDISON IL 60101-1495

01/03/18 - KIRK OVERSTREET

ACCOUNT NUMBER		ACCOUNT MANAGER	SHIP TO ID		ORDER NUMBER		ORDER DATE	SHIPPED DATE	
53286265		Depot, Office	06		989064298001		12/12/2017	12/13/2017	
BILLING ID	PURCHASE ORDER	RELEASE		ORDERED BY		DESKTOP		COST CENTER	
9080291	355434			Maureen Mitacek/ADC		MAUREEN MITACEK/ADC			
CATALOG ITEM # / MANUF CODE	DESCRIPTION / CUSTOMER ITEM #		U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE	
899436	CLEANER,SWFFR,WET,PD,RFL		EA	1	1	0	8.790	8.79	
37624	899436								

SUB-TOTAL	8.79
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	8.79

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT
COLG OF DUPAGE	9080291	989064298001	12/13/2017	\$8.79

AMOUNT ENCLOSED

FL0 090802919 9890642980010 00000000879 1 2

PLEASE
SEND YOUR
CHECK TO:

OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1087302
Vendor Name: Office Depot
Invoice Number: 989061254001
Invoice Date: 12/13/17
PO Number: P0355433
Check Number: 0230102
Check Amount: \$ 9,247.77
Check Date: 01/17/2018
Department ID: 14205
Reviewer Name: Elizabeth Holmwood
Voucher Number: V0490257
Redaction Type: None
Document Type: AP Invoice

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 15 19:58:40 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/09/2017 to 12/15/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/09/2017 to 12/15/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
989061254001	\$21.59	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/13/2017	Net 30	01/14/2018

Federal ID # 59-2663954

Bill To: ATTN: ACCOUNTS PAYABLE
COLG OF DUPAGE
425 FAWCETT BLVD
GLEN ELLY IL 60137-6599
|||

APPROVED

Ship To: COLLEGE OF DUPAGE WESTMONT
650 PASQUINELLI DR
WESTMONT IL 60559-1252

12/22/17 - ANDREA LIEDTKE

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		07		989061254001		12/12/2017		12/13/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355433				Phillips, Bradley		PHILLIPS, BRADLEY				
CATALOG ITEM # / MANUF CODE	DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE		EXTENDED PRICE	
545316 QU1500B20Z10	BATTERY,QUANTUM,AA,20PK 545316			PK	1	1	0	21.590		21.59	

**INVOICE REVIEWED
OKAY TO PAY
ELIZABETH HOLMWOOD 12/22/17**

	SUB-TOTAL	21.59
	DISCOUNT	0.00
	DELIVERY	0.00
	MISCELLANEOUS	0.00
	SALES TAX	0.00
ALL AMOUNTS ARE BASED ON USD CURRENCY	TOTAL	21.59

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COLG OF DUPAGE	9080291	989061254001	12/13/2017	\$21.59	

FL0 090802919 9890612540018 00000002159 1 8

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 992065597001

Invoice Date: 12/26/17

PO Number: P0355614

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00729

Reviewer Name:

Voucher Number: V0490444

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 29 17:19:34 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/23/2017 to 12/29/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/23/2017 to 12/29/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:

Account Inquiries: (888) 263-3423

Order Inquiries: (800) 721-6592

3 WAY MATCH

Federal ID # 59-2663954

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
992065597001	\$11.89	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/26/2017	Net 30	01/28/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER	SHIP TO ID		ORDER NUMBER		ORDER DATE	SHIPPED DATE	
53286265		Depot, Office	99		992065597001		12/22/2017		12/26/2017
BILLING ID	PURCHASE ORDER	RELEASE		ORDERED BY		DESKTOP		COST CENTER	
9080291	355614			Humphrey, Vera		HUMPHREY, VERA			
CATALOG ITEM # / MANUF CODE	DESCRIPTION / CUSTOMER ITEM #		U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE	
486108 30203	MOUSEPAD, MEMORY FOAM, BLA 486108		EA	1	1	0	11.890	11.89	

SUB-TOTAL	11.89
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	11.89

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT
COLG OF DUPAGE	9080291	992065597001	12/26/2017	\$11.89

AMOUNT ENCLOSED

FL0 090802919 9920655970010 00000001189 1 3

PLEASE
SEND YOUR
CHECK TO:

OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 990589784001

Invoice Date: 12/23/17

PO Number: P0355573

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 15065

Reviewer Name:

Voucher Number: V0490486

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 29 17:16:53 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/23/2017 to 12/29/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/23/2017 to 12/29/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

3 WAY MATCH

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

Federal ID # 59-2663954

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
990589784001	\$19.79	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/23/2017	Net 30	01/28/2018

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		990589784001		12/20/2017		12/23/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355573				c yearman src 2102		C YEARMAN SRC 2102				
CATALOG ITEM # / MANUF CODE	DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE		
666312 1SID40P	STAMP,SELF INK,1.87X2.31 666312			EA	1	1	0	19.790	19.79		

SUB-TOTAL	19.79
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	19.79

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COI G OF DUPAGE	9080291	990589784001	12/23/2017	\$19.79	

FLO 090802919 9905897840014 000000001979 1 4

PLEASE
SEND YOUR
CHECK TO:

OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 992046446001

Invoice Date: 12/26/17

PO Number: P0355610

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00465

Reviewer Name:

Voucher Number: V0490487

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 29 17:16:53 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/23/2017 to 12/29/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/23/2017 to 12/29/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 991566235001

Invoice Date: 12/27/17

PO Number: P0355542

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00225

Reviewer Name:

Voucher Number: V0490492

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com

Sent: Fri Dec 29 17:14:58 CST 2017

To: invoicing@cod.edu

CC:

Subject: Your Electronic Billing for the period 12/23/2017 to 12/29/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/23/2017 to 12/29/2017.

For questions regarding billing format, please contact billingsetup@officedepot.com.

For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

3 WAY MATCH

Federal ID # 59-2663954

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
991566235001	\$3.18	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/27/2017	Net 30	01/28/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		991566235001		12/19/2017		12/27/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355542				Janelle Walker		JANELLE WALKER				
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE		EXTENDED PRICE
767541 ODUSRB02		BAG,FREEZER,GALLON,15CT 767541			EA	3	3	0	1.060		3.18

SUB-TOTAL	3.18
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	3.18

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT
COLG OF DUPAGE	9080291	991566235001	12/27/2017	\$3.18

AMOUNT ENCLOSED

FL0 090802919 9915662350016 00000000318 1 9

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 992046447001

Invoice Date: 12/26/17

PO Number: P0355609

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00465

Reviewer Name:

Voucher Number: V0490493

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 29 17:12:49 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/23/2017 to 12/29/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/23/2017 to 12/29/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:

Account Inquiries: (888) 263-3423

Order Inquiries: (800) 721-6592

Federal ID # 59-2663

3 WAY MATCH

Bill To:

ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

Ship To :

COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
992046447001	\$6.49	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/26/2017	Net 30	01/28/2018

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		992046447001		12/22/2017		12/26/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355609				SSC3200 Jennifer Such		SSC3200 JENNIFER SUC				
CATALOG ITEM # / MANUF CODE	DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE		
209093 101613	Calendar,W,11x8,RuDufIr, 209093			EA	1	1	0	6.490	6.49		

SUB-TOTAL	6.49
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	6.49

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COI G OF DUPAGE	9080291	992046447001	12/26/2017	\$6.49	

FLO

090802919 9920464470012 000000000649 1 7

PLEASE
SEND YOUR
CHECK TO:

OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 991566232002

Invoice Date: 12/21/17

PO Number: P0355542

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00225

Reviewer Name:

Voucher Number: V0490532

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 22 17:47:52 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/16/2017 to 12/22/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/16/2017 to 12/22/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:

Account Inquiries: (888) 263-3423

Order Inquiries: (800) 721-6592

3 WAY MATCH

Federal ID # 59-2663954

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
991566232002	\$18.99	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/21/2017	Net 30	01/21/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		991566232002		12/19/2017		12/21/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355542				Janelle Walker		JANELLE WALKER				
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE		EXTENDED PRICE
607466 1000033127		ALCOHOL,RUBBING,SWAN,160 607466			CA	1	1	0	18.990		18.99

	SUB-TOTAL	18.99
	DISCOUNT	0.00
	DELIVERY	0.00
	MISCELLANEOUS	0.00
	SALES TAX	0.00
ALL AMOUNTS ARE BASED ON USD CURRENCY	TOTAL	18.99

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
CO LG OF DUPAGE	9080291	991566232002	12/21/2017	\$18.99	

FLO 090802919 9915662320027 000000001899 1 8

PLEASE
SEND YOUR
CHECK TO:

OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 991540561001

Invoice Date: 12/21/17

PO Number: P0355541

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 14625

Reviewer Name:

Voucher Number: V0490535

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 22 17:46:56 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/16/2017 to 12/22/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/16/2017 to 12/22/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

3 WAY MATCH

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
991540561001	\$115.99	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/21/2017	Net 30	01/21/2018

Federal ID # 59-2663954

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		991540561001		12/19/2017		12/21/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355541				Melissa Fanella SRC-1111		MELISSA FANELLA SRC-				
CATALOG ITEM # / MANUF CODE	DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE		
322936 RM2G	GUSSETED STAYFLAT,12.5X9 322936			BX	1	1	0	115.990	115.99		

SUB-TOTAL	115.99
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	115.99

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COLG OF DUPAGE	9080291	991540561001	12/21/2017	\$115.99	

FL0 090802919 9915405610015 00000011599 1 8

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 990079930001

Invoice Date: 12/18/17

PO Number: P0355476

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00457

Reviewer Name:

Voucher Number: V0490538

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 22 17:46:57 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/16/2017 to 12/22/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/16/2017 to 12/22/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

3 WAY MATCH

Federal ID # 59-2663954

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
990079930001	\$198.38	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/18/2017	Net 30	01/21/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		990079930001		12/15/2017		12/18/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355476				Salazar, Emmanuel		SALAZAR, EMMANUEL				
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE	
333036 KCC21005PK		KLEENEX,FACIAL TISSUE,BU 333036			PK	5	5	0	6.390	31.95	
754965 GOJ365912CT		PURELL ORIG 12OZ PUMP BT 754965			CA	1	1	0	76.450	76.45	
673985 RAC78849CT		WIPES,SANITIZ,LYSOL,CITR 673985			CT	2	2	0	44.990	89.98	

SUB-TOTAL	198.38
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	198.38

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT
COLG OF DUPAGE	9080291	990079930001	12/18/2017	\$198.38

AMOUNT ENCLOSED

FL0 090802919 9900799300019 00000019838 1 2

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1087302
Vendor Name: Office Depot
Invoice Number: 991034321001
Invoice Date: 12/19/17
PO Number: P0355498
Check Number: 0230102
Check Amount: \$ 9,247.77
Check Date: 01/17/2018
Department ID: 14005
Reviewer Name: Elizabeth Holmwood
Voucher Number: V0490544
Redaction Type: None
Document Type: AP Invoice

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 22 17:47:00 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/16/2017 to 12/22/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/16/2017 to 12/22/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 991566234001

Invoice Date: 12/20/17

PO Number: P0355542

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00225

Reviewer Name:

Voucher Number: V0490545

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 22 17:47:00 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/16/2017 to 12/22/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/16/2017 to 12/22/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

3 WAY MATCH

Federal ID # 59-2663954

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
991566234001	\$39.10	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/20/2017	Net 30	01/21/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		991566234001		12/19/2017		12/20/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355542				Janelle Walker		JANELLE WALKER				
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE	
853098 OD02H		CALCULATOR,STANDARD,MINI 853098			EA	10	10	0	3.910	39.10	

SUB-TOTAL	39.10
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	39.10

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT
COLG OF DUPAGE	9080291	991566234001	12/20/2017	\$39.10

AMOUNT ENCLOSED

FL0 090802919 9915662340017 00000003910 1 6

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 991199205001

Invoice Date: 12/19/17

PO Number: P0355512

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00421

Reviewer Name:

Voucher Number: V0490547

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 22 17:47:00 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/16/2017 to 12/22/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/16/2017 to 12/22/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:

Account Inquiries: (888) 263-3423

Order Inquiries: (800) 721-6592

Federal ID # 59-262395

3 WAY MATCH

Bill To:

ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

Ship To :

COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
991199205001	\$19.00	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/19/2017	Net 30	01/21/2018

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		991199205001		12/18/2017		12/19/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355512				BIC 2E06N-Cathie Walker		BIC 2E06N-CATHIE WAL				
CATALOG ITEM # / MANUF CODE	DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE		
955452	DESK,CAL,RFL,DY,RY18,3.5			EA	4	4	0	4.750	19.00		
E7175018	955452										

SUB-TOTAL	19.00
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	19.00

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
CO LG OF DUPAGE	9080291	991199205001	12/19/2017	\$19.00	

FLO

090802919 9911992050012 000000001900 1 8

PLEASE
SEND YOUR
CHECK TO:

OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 991438317001

Invoice Date: 12/20/17

PO Number: P0355527

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00241

Reviewer Name:

Voucher Number: V0490548

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 22 17:47:01 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/16/2017 to 12/22/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/16/2017 to 12/22/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

3 WAY MATCH

Federal ID # 59-2663954

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
991438317001	\$38.98	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/20/2017	Net 30	01/21/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		991438317001		12/19/2017		12/20/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355527				Carrington, Robert R.		CARRINGTON, ROBERT R				
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE		EXTENDED PRICE
775660 1752229		CLEANER,DE BOARD,EXPO,22 775660			EA	5	5	0	6.440		32.20
843796 OD-3312D		NOTES,SELF-STICK,OD,12PK 843796			PK	1	1	0	6.780		6.78

SUB-TOTAL	38.98
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	38.98

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT
COLG OF DUPAGE	9080291	991438317001	12/20/2017	\$38.98

AMOUNT ENCLOSED

FL0 090802919 9914383170019 00000003898 1 7

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 991103182001

Invoice Date: 12/19/17

PO Number: P0355503

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00385

Reviewer Name:

Voucher Number: V0490549

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com

Sent: Fri Dec 22 17:47:30 CST 2017

To: invoicing@cod.edu

CC:

Subject: Your Electronic Billing for the period 12/16/2017 to 12/22/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/16/2017 to 12/22/2017.

For questions regarding billing format, please contact billingsetup@officedepot.com.

For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 990152269001

Invoice Date: 12/18/17

PO Number: P0355485

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 14625

Reviewer Name:

Voucher Number: V0490550

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 22 17:47:01 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/16/2017 to 12/22/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/16/2017 to 12/22/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:

Account Inquiries: (888) 263-3423

Order Inquiries: (800) 721-6592

3 WAY MATCH

Federal ID # 59-2663954

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
990152269001	\$13.19	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/18/2017	Net 30	01/21/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		990152269001		12/15/2017		12/18/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355485				Y. Bedford SRC-1111		Y. BEDFORD SRC-1111				
CATALOG ITEM # / MANUF CODE	DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE		
760524 DUC1396747	TAPE,FROG,1.41"X45YDS,GN 760524			RL	1	1	0	13.190	13.19		

	SUB-TOTAL	13.19
	DISCOUNT	0.00
	DELIVERY	0.00
	MISCELLANEOUS	0.00
	SALES TAX	0.00
ALL AMOUNTS ARE BASED ON USD CURRENCY	TOTAL	13.19

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COLG OF DUPAGE	9080291	990152269001	12/18/2017	\$13.19	

FLO 090802919 9901522690015 00000001319 1 9

PLEASE
SEND YOUR
CHECK TO:

OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 991199204001

Invoice Date: 12/19/17

PO Number: P0355512

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00421

Reviewer Name:

Voucher Number: V0490551

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 22 17:45:56 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/16/2017 to 12/22/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/16/2017 to 12/22/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 991200334001

Invoice Date: 12/19/17

PO Number: P0355513

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00757

Reviewer Name:

Voucher Number: V0490552

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 22 17:45:56 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/16/2017 to 12/22/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/16/2017 to 12/22/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

ACCOUNT NUMBER		ACCOUNT MANAGER	SHIP TO ID		ORDER NUMBER		ORDER DATE	SHIPPED DATE	
53286265		Depot, Office	99		991200334001		12/18/2017	12/19/2017	
BILLING ID	PURCHASE ORDER	RELEASE		ORDERED BY		DESKTOP		COST CENTER	
9080291	355513			Greenbusch, Heather		GREENBUSCH, HEATHER			
CATALOG ITEM # / MANUF CODE	DESCRIPTION / CUSTOMER ITEM #		U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE	
520328 41001-OD	DISPENSER,DESK,1" CORE,B		EA	3	3	0	2.280	6.84	
520928 OD-IB3428-10	TAPE,INVISIBLE,3/4X1000,		PK	1	1	0	7.560	7.56	
909671 20325	RUBBERBAND,SIZE 32,1LB		BX	1	1	0	7.990	7.99	
909655 20185	RUBBERBAND,SIZE 18,1LB		BX	1	1	0	7.990	7.99	
464899 201400647	TAGS,KEY,STEELMASTER,ASR		PK	1	1	0	8.490	8.49	
211029 70318	FILE,EXP,LTR,W/FLAP & CO		EA	2	2	0	17.990	35.98	
992255 R117DL	FILE,EXPAND,DAILY,12X10,		EA	2	2	0	28.890	57.78	
196063 BF-S-1	PEN,BALLPOINT,STAY-PUT,B		EA	5	5	0	1.290	6.45	
196048 BF-S-3	REFILL,PEN,STAY-PUT,BLAC		EA	10	10	0	1.010	10.10	
603293 032521	REFILL,PRE-INK,2/PK,BLAC		PK	1	1	0	4.990	4.99	
108862 108862	PAPER ROLL,2-1/4X130,SNG		PK	2	2	0	4.540	9.08	
769345 10454	TRAY,PLSTC,RECYCLED,2PK,		PK	2	2	0	10.270	20.54	
705211 21032	TRAY, FRNTLOAD,LTR,BK		EA	2	2	0	5.030	10.06	
207022 PIL32802	PEN,B2P BG BALLPT REDM,R		DZ	3	3	0	19.190	57.57	



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
991200334001	\$251.42	2 of 2
INVOICE DATE	TERMS	PAYMENT DUE
12/19/2017	Net 30	01/21/2018

Federal ID # 59-2663954

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		991200334001		12/18/2017		12/19/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355513				Greenbusch, Heather		GREENBUSCH, HEATHER				
CATALOG ITEM # / MANUF CODE	DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE		EXTENDED PRICE	

SUB-TOTAL	251.42
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	251.42

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COLG OF DUPAGE	9080291	991200334001	12/19/2017	\$251.42	

FL0 090802919 9912003340012 00000025142 1 0

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1087302
Vendor Name: Office Depot
Invoice Number: 989825859001
Invoice Date: 12/15/17
PO Number: P0355451
Check Number: 0230102
Check Amount: \$ 9,247.77
Check Date: 01/17/2018
Department ID: 00049
Reviewer Name: Anna Gay
Voucher Number: V0490553
Redaction Type: None
Document Type: AP Invoice

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 22 17:45:56 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/16/2017 to 12/22/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/16/2017 to 12/22/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:

Account Inquiries: (888) 263-3423

Order Inquiries: (800) 721-6592

Federal ID # 59-2663954

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

APPROVED

Shop T COLLEGE OF JUPAGE ADDISON
301 S SWIFT RD
ADDISON IL 60101-1495

01/08/18 - CHARLES BOONE

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
989825859001	\$75.98	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/15/2017	Net 30	01/14/2018

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		40		989825859001		12/13/2017		12/15/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355451				Trinidad, Tina		TRINIDAD, TINA				
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE	
388085 GOJ911104EC		SANITIZER,WIPES,WHT 388085			CA	2	2	0	37.990	75.98	

INVOICE REVIEW
OKAY TO PAY
ANNA GAY 01/05

SUB-TOTAL	75.98
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	75.98

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
CO LG OF DUPAGE	9080291	989825859001	12/15/2017	\$75.98	

FLO 090802919 9898258590015 00000007598 1 5

PLEASE
SEND YOUR
CHECK TO:

OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 987601666001

Invoice Date: 12/21/17

PO Number: P0355366

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00449

Reviewer Name:

Voucher Number: V0490571

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 22 17:45:57 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/16/2017 to 12/22/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/16/2017 to 12/22/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 990163676001

Invoice Date: 12/18/17

PO Number: P0355488

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 15240

Reviewer Name:

Voucher Number: V0490572

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 22 17:45:57 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/16/2017 to 12/22/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/16/2017 to 12/22/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:

Account Inquiries: (888) 263-3423

Order Inquiries: (800) 721-6592

3 WAY MATCH

Federal ID # 59-2663954

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
990163676001	\$90.42	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/18/2017	Net 30	01/21/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		990163676001		12/15/2017		12/18/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355488				Haines, Nancy - Library		HAINES, NANCY - LIBR				
CATALOG ITEM # / MANUF CODE	DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE		
149407 CLO01599	WIPES,DISINFECTING,2PK			PK	4	4	0	9.490	37.96		
618405 KCC21271	TISSUE,KLEENEX,BOUTIQUE,			PK	1	1	0	9.290	9.29		
308478 10001	CLIP,PAPER,#1,SMTH,OD,10			PK	3	3	0	1.850	5.55		
420994 OD-3318Y	NOTE OD,3X3,YLW,18PK			PK	1	1	0	5.780	5.78		
766967 OD766967	STAPLES,STANDARD,OD			BX	16	16	0	1.990	31.84		

SUB-TOTAL	90.42
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	90.42

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COLG OF DUPAGE	9080291	990163676001	12/18/2017	\$90.42	

FLO 090802919 9901636760019 00000009042 1 1

PLEASE
SEND YOUR
CHECK TO:

OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 990589785001

Invoice Date: 12/21/17

PO Number: P0355573

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 15065

Reviewer Name:

Voucher Number: V0490573

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 22 17:45:59 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/16/2017 to 12/22/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/16/2017 to 12/22/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:

Account Inquiries: (888) 263-3423

Order Inquiries: (800) 721-6592

Federal ID # 59-2663954

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
990589785001	\$26.08	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/21/2017	Net 30	01/21/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-0599

E3 WAY MATCH

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		990589785001		12/20/2017		12/21/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355573				c yearman src 2102		C YEARMAN SRC 2102				
CATALOG ITEM # / MANUF CODE	DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE		
546858 4TB	BOX,4 LITER,BLUE 546858			EA	1	1	0	8.490	8.49		
576563 70260G0518	PLANNER,MTH,RY18,9X11,BL 576563			EA	1	1	0	17.590	17.59		

SUB-TOTAL	26.08
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	26.08

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COI G OF DUPAGE	9080291	990589785001	12/21/2017	\$26.08	

FL0 090802919 9905897850013 00000002608 1 0

PLEASE
SEND YOUR
CHECK TO:

OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1087302
Vendor Name: Office Depot
Invoice Number: 990167057001
Invoice Date: 12/18/17
PO Number: P0355489
Check Number: 0230102
Check Amount: \$ 9,247.77
Check Date: 01/17/2018
Department ID: 00089
Reviewer Name: Linda Hickman
Voucher Number: V0490575
Redaction Type: None
Document Type: AP Invoice

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 22 17:46:02 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/16/2017 to 12/22/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/16/2017 to 12/22/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:

Account Inquiries: (888) 263-3423

Order Inquiries: (800) 721-6592

Federal ID # 59-2663954

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

APPROVED OFFICE OF DUPAGE SHIPPING
465 W. MELL BLVD
GLEN ELLYN IL 60137-6599

01/16/18 - DONNA STEWART

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
990167057001	\$11.90	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/18/2017	Net 30	01/21/2018

ACCOUNT NUMBER		ACCOUNT MANAGER	SHIP TO ID		ORDER NUMBER		ORDER DATE	SHIPPED DATE	
53286265		Depot, Office	99		990167057001		12/15/2017	12/18/2017	
BILLING ID	PURCHASE ORDER	RELEASE		ORDERED BY		DESKTOP		COST CENTER	
9080291	355489			Jim Filipek		JIM FILIPEK			
CATALOG ITEM # / MANUF CODE	DESCRIPTION / CUSTOMER ITEM #		U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE	
959092 WD-16000103	ERASER, MAGNETIC, DRY ER 959092		EA	10	10	0	1.190	11.90	

INVOICE REVIEWED

OKAY TO PAY

LINDA HICKMAN 01/11/18

SUB-TOTAL	11.90
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	11.90

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COLG OF DUPAGE	9080291	990167057001	12/18/2017	\$11.90	

FLO 090802919 9901670570019 00000001190 1 7

PLEASE
SEND YOUR
CHECK TO:

OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 990152268001

Invoice Date: 12/18/17

PO Number: P0355485

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 14625

Reviewer Name:

Voucher Number: V0490576

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 22 17:46:02 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/16/2017 to 12/22/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/16/2017 to 12/22/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
990152268001	\$49.47	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/18/2017	Net 30	01/21/2018

Federal ID # 59-2663954

3 WAY MATCH

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		990152268001		12/15/2017		12/18/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355485				Y. Bedford SRC-1111		Y. BEDFORD SRC-1111				
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE	
1385911 OD02986		OD DUR VW 1"BDR SLNT RNG 1385911			EA	5	5	0	4.190	20.95	
474208 11201		DIVIDER,INDEX,8TAB,MUTLI 474208			ST	5	5	0	2.290	11.45	
452913 812-10P		TAPE,ECO,MAGIC,3/4"x900" 452913			PK	1	1	0	17.070	17.07	

SUB-TOTAL	49.47
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	49.47

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT
COLG OF DUPAGE	9080291	990152268001	12/18/2017	\$49.47

AMOUNT ENCLOSED

FL0 090802919 9901522680016 00000004947 1 3

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 989588932001

Invoice Date: 12/18/17

PO Number: P0355456

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00697

Reviewer Name:

Voucher Number: V0490577

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com

Sent: Fri Dec 22 17:46:02 CST 2017

To: invoicing@cod.edu

CC:

Subject: Your Electronic Billing for the period 12/16/2017 to 12/22/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/16/2017 to 12/22/2017.

For questions regarding billing format, please contact billingsetup@officedepot.com.

For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

3 WAY MATCH

Federal ID # 59-2663954

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
989588932001	\$44.98	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/18/2017	Net 30	01/21/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		989588932001		12/14/2017		12/18/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355456				T.Cascarano X4280		T.CASCARANO X4280				
CATALOG ITEM # / MANUF CODE	DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE		EXTENDED PRICE	
184315 1SID30PN	2000+ Self-inking Notary 184315			EA	1	1	0	22.490		22.49	
184315 1SID30PN	2000+ Self-inking Notary 184315			EA	1	1	0	22.490		22.49	

SUB-TOTAL	44.98
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	44.98

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT
COLG OF DUPAGE	9080291	989588932001	12/18/2017	\$44.98

AMOUNT ENCLOSED

FL0 090802919 9895889320010 00000004498 1 6

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1087302
Vendor Name: Office Depot
Invoice Number: 991033869001
Invoice Date: 12/19/17
PO Number: P0355497
Check Number: 0230102
Check Amount: \$ 9,247.77
Check Date: 01/17/2018
Department ID: 14145
Reviewer Name: Elizabeth Holmwood
Voucher Number: V0490578
Redaction Type: None
Document Type: AP Invoice

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 22 17:37:10 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/16/2017 to 12/22/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/16/2017 to 12/22/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 990101245001

Invoice Date: 12/18/17

PO Number: P0355478

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00733

Reviewer Name:

Voucher Number: V0490580

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 22 17:32:55 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/16/2017 to 12/22/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/16/2017 to 12/22/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
990101245001	\$80.08	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/18/2017	Net 30	01/21/2018

Federal ID # 53286265

3 WAY MATCH

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		990101245001		12/15/2017		12/18/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355478				Johnson, Martha		JOHNSON, MARTHA				
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE	
308239 10004		CLIP,PAPER,JMB,SMTH,OD,1 308239			PK	4	4	0	4.670	18.68	
308478 10001		CLIP,PAPER,#1,SMTH,OD,10 308478			PK	4	4	0	1.850	7.40	
609030 SPR52772		TRAY,LETTER,WIRE,BLK 609030			BX	1	1	0	19.990	19.99	
822593 16550		SHEARS,2PK,TITANIUM,8IN 822593			PK	2	2	0	15.990	31.98	
309643 13953		PENCIL,#2,TICONDEROGA,DZ 309643			DZ	1	1	0	1.870	1.87	
206503 BG206503		ERASER,CAP,RED,12/PK 206503			PK	1	1	0	0.160	0.16	

SUB-TOTAL	80.08
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	80.08

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COLG OF DUPAGE	9080291	990101245001	12/18/2017	\$80.08	

FL0 090802919 9901012450011 00000008008 1 1

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 991445819001

Invoice Date: 12/20/17

PO Number: P0355530

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00466

Reviewer Name:

Voucher Number: V0490581

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 22 17:32:55 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/16/2017 to 12/22/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/16/2017 to 12/22/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:

Account Inquiries: (888) 263-3423

Order Inquiries: (800) 721-6592

3 WAY MATCH

Federal ID # 59-2663954

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
991445819001	\$87.22	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/20/2017	Net 30	01/21/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		991445819001		12/19/2017		12/20/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355530				Ileana Nava SSC 3233		ILEANA NAVA SSC 3233				
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #		U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE		EXTENDED PRICE	
211466 PN925		GUIDE,FILE,LETTER,A-Z 211466		PK	1	1	0	14.760		14.76	
492405 W368-14NBPP		BINDER,3RG,VNL,11X8.5,1" 492405		EA	1	1	0	1.810		1.81	
492660 W368-14NBLPP1		BNDR,3RG,VNL,11X8.5,1",B 492660		EA	2	2	0	1.810		3.62	
493122 W368-44NBPP		BNDR,3RG,VNL,2",BLK 493122		EA	3	3	0	3.370		10.11	
592759 47846		PORTFOLIO,FLXVW,2PKT,2/P 592759		PK	3	3	0	8.990		26.97	
620954 OD620954		SHEET PROTECTOR,W/8TAB,H 620954		ST	5	5	0	5.990		29.95	

SUB-TOTAL	87.22
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	87.22

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COI G OF DUPAGE	9080291	991445819001	12/20/2017	\$87.22	

FLO 090802919 9914458190017 00000008722 1 8

PLEASE
SEND YOUR
CHECK TO:

OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 990149898001

Invoice Date: 12/18/17

PO Number: P0355484

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 63001

Reviewer Name:

Voucher Number: V0490583

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 22 17:33:13 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/16/2017 to 12/22/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/16/2017 to 12/22/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

3 WAY MATCH

Federal ID # 59-2663954

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
990149898001	\$9.49	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/18/2017	Net 30	01/21/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		990149898001		12/15/2017		12/18/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355484				Barb DiMonte, SRC-1111		BARB DIMONTE, SRC-11				
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE	
149407 CLO01599		WIPES,DISINFECTING,2PK 149407			PK	1	1	0	9.490	9.49	

SUB-TOTAL	9.49
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	9.49

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT
COLG OF DUPAGE	9080291	990149898001	12/18/2017	\$9.49

AMOUNT ENCLOSED

FL0 090802919 9901498980010 00000000949 1 2

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 989903354001

Invoice Date: 12/15/17

PO Number: P0355468

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00153

Reviewer Name:

Voucher Number: V0490584

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 22 17:33:13 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/16/2017 to 12/22/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/16/2017 to 12/22/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

3 WAY MATCH

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
989903354001	\$32.99	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/15/2017	Net 30	01/14/2018

Federal ID # 59-2663954

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER	SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office	99		989903354001		12/14/2017		12/15/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER	
9080291	355468				Fisk, Cindy		FISK, CINDY			
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #		U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE	

Instructions: Please label pkg. Attn: Cindy Fisk HSC1122
352624 DOTS,VELCRO,3/4",200/RL,
VEL105 352624
RL 1 1 0 32.990 32.99

	SUB-TOTAL	32.99
	DISCOUNT	0.00
	DELIVERY	0.00
	MISCELLANEOUS	0.00
	SALES TAX	0.00
ALL AMOUNTS ARE BASED ON USD CURRENCY	TOTAL	32.99

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COLG OF DUPAGE	9080291	989903354001	12/15/2017	\$32.99	

FL0 090802919 9899033540010 00000003299 1 4

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 991733519001

Invoice Date: 12/22/17

PO Number: P0355583

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00462

Reviewer Name:

Voucher Number: V0490585

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 22 17:32:10 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/16/2017 to 12/22/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/16/2017 to 12/22/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:

Account Inquiries: (888) 263-3423

Order Inquiries: (800) 721-6592

Federal ID # 50-26354

3-WAY MATCH

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
991733519001	\$44.94	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/22/2017	Net 30	01/21/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		991733519001		12/21/2017		12/22/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355583				Nigohosian, Patricia		NIGOHOSIAN, PATRICIA				
CATALOG ITEM # / MANUF CODE	DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE		
1385803 OD03001	OD DUR VW 2"BDR SLNT RNG 1385803			EA	6	6	0	7.490	44.94		

	SUB-TOTAL	44.94
	DISCOUNT	0.00
	DELIVERY	0.00
	MISCELLANEOUS	0.00
	SALES TAX	0.00
ALL AMOUNTS ARE BASED ON USD CURRENCY	TOTAL	44.94

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COI G OF DUPAGE	9080291	991733519001	12/22/2017	\$44.94	

FLO 090802919 9917335190019 00000004494 1 6

PLEASE
SEND YOUR
CHECK TO:

OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 990109880001

Invoice Date: 12/18/17

PO Number: P0355480

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00401

Reviewer Name:

Voucher Number: V0490586

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 22 17:31:28 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/16/2017 to 12/22/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/16/2017 to 12/22/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:

Account Inquiries: (888) 263-3423

Order Inquiries: (800) 721-6592

Federal ID # 59-2663954

3 WAY MATCH

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
990109880001	\$19.48	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/18/2017	Net 30	01/21/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		990109880001		12/15/2017		12/18/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355480				Kathy Smid		KATHY SMID				
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #		U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE		EXTENDED PRICE	
307536 OIC35710		PINS,PUSH,TRANS,200CT,AS 307536		PK	1	1	0	4.490		4.49	
1373347 1443750D		Man Guide A-Z 1/5Cut Ltr 1373347		PK	1	1	0	13.490		13.49	
825265 AV14-1048		PIN,PUSH,200CT,CLEAR 825265		BX	1	1	0	1.500		1.50	

	SUB-TOTAL	19.48
	DISCOUNT	0.00
	DELIVERY	0.00
	MISCELLANEOUS	0.00
	SALES TAX	0.00
ALL AMOUNTS ARE BASED ON USD CURRENCY	TOTAL	19.48

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
CO LG OF DUPAGE	9080291	990109880001	12/18/2017	\$19.48	

FLO 090802919 9901098800014 00000001948 1 9

PLEASE
SEND YOUR
CHECK TO:

OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 986027584002

Invoice Date: 12/20/17

PO Number: P0355295

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00423

Reviewer Name:

Voucher Number: V0490613

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com

Sent: Fri Dec 22 17:31:28 CST 2017

To: invoicing@cod.edu

CC:

Subject: Your Electronic Billing for the period 12/16/2017 to 12/22/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/16/2017 to 12/22/2017.

For questions regarding billing format, please contact billingsetup@officedepot.com.

For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
986027584002	\$10.78	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/20/2017	Net 30	01/21/2018

Federal ID # 59-2663954

3 WAY MATCH
Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		986027584002		12/01/2017		12/20/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355295				Munguia, Cassi BIC 2E06		MUNGUIA, CASSI BIC 2				
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE		EXTENDED PRICE
307013 D1090-704-18		DESKPAD,M,RY18,LG,MEDLY 307013			EA	1	1	0	10.780		10.78

SUB-TOTAL	10.78
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	10.78

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT
COLG OF DUPAGE	9080291	986027584002	12/20/2017	\$10.78

AMOUNT ENCLOSED

FL0 090802919 9860275840021 00000001078 1 1

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1087302
Vendor Name: Office Depot
Invoice Number: 991034320001
Invoice Date: 12/19/17
PO Number: P0355498
Check Number: 0230102
Check Amount: \$ 9,247.77
Check Date: 01/17/2018
Department ID: 14005
Reviewer Name: Elizabeth Holmwood
Voucher Number: V0490615
Redaction Type: None
Document Type: AP Invoice

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 22 17:31:47 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/16/2017 to 12/22/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/16/2017 to 12/22/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
991034320001	\$93.84	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/19/2017	Net 30	01/21/2018

Federal ID # 59-2663954

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

APPROVED
OFFICE DEPOT COLLEGE OF DUPAGE ADDISON
30 S. STATE RD
ADDISON IL 60101-1495
01/08/18 - ANDREA LIEDTKE

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		06		991034320001		12/18/2017		12/19/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355498				Maureen Mitacek/ADC		MAUREEN MITACEK/ADC				
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE		EXTENDED PRICE
112488 LIO40008BK		BINDER,EASEL,11X8.5,BK 112488			EA	1	1	0	24.990		24.99
475144 3585414706		DIVIDERS,TOC,A-Z,MULTICO 475144			ST	10	10	0	2.120		21.20
909403 EVE2032BP2		BATTERY,LITHIUM,ENERGIZE 909403			PK	1	1	0	2.170		2.17
429431 825190BX		CLIP,BINDER,MEDIUM, 429431			BX	6	6	0	0.590		3.54
251161 RAC93045		REFILL, SNUGGLE 2PK 6 170 251161			PK	2	2	0	14.190		28.38
823184 KCC21200		KLEINEX, DUTY QUL BND E 823184			P	3		0	4.520		13.56

INVOICE REVIEWED
OKAY TO PAY

ELIZABETH HOLMWOOD 01/08/18

	SUB-TOTAL	93.84
	DISCOUNT	0.00
	DELIVERY	0.00
	MISCELLANEOUS	0.00
	SALES TAX	0.00
ALL AMOUNTS ARE BASED ON USD CURRENCY	TOTAL	93.84

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COLG OF DUPAGE	9080291	991034320001	12/19/2017	\$93.84	

FL0 090802919 9910343200011 00000009384 1 4

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 991214089001

Invoice Date: 12/20/17

PO Number: P0355518

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00181

Reviewer Name:

Voucher Number: V0490616

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 22 17:31:51 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/16/2017 to 12/22/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/16/2017 to 12/22/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

3 WAY MATCH

Federal ID # 50-2662054

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
991214089001	\$111.58	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/20/2017	Net 30	01/21/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER	SHIP TO ID		ORDER NUMBER		ORDER DATE	SHIPPED DATE	
53286265		Depot, Office	99		991214089001		12/18/2017	12/20/2017	
BILLING ID	PURCHASE ORDER	RELEASE		ORDERED BY	DESKTOP		COST CENTER		
9080291	355518			Krakora, Dan	KRAKORA, DAN				
CATALOG ITEM # / MANUF CODE	DESCRIPTION / CUSTOMER ITEM #		U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE	
179200	Instructions: Please deliver to Dan Krakora EMS/Fire Science Manager Centon DataStick Pro - U 179200		EA	2	2	0	55.790	111.58	
DSP8GB10PK									

	SUB-TOTAL	111.58
	DISCOUNT	0.00
	DELIVERY	0.00
	MISCELLANEOUS	0.00
	SALES TAX	0.00
ALL AMOUNTS ARE BASED ON USD CURRENCY	TOTAL	111.58

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COLG OF DUPAGE	9080291	991214089001	12/20/2017	\$111.58	

FL0 090802919 9912140890010 00000011158 1 9

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 991733518001

Invoice Date: 12/22/17

PO Number: P0355583

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00462

Reviewer Name:

Voucher Number: V0490617

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 22 17:31:47 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/16/2017 to 12/22/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/16/2017 to 12/22/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 990167056001

Invoice Date: 12/18/17

PO Number: P0355489

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00089

Reviewer Name:

Voucher Number: V0490618

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 22 17:32:11 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/16/2017 to 12/22/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/16/2017 to 12/22/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

3 WAY MATCH

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
990167056001	\$58.67	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/18/2017	Net 30	01/21/2018

Federal ID # 59-2663954

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		990167056001		12/15/2017		12/18/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355489				Jim Filipek		JIM FILIPEK				
CATALOG ITEM # / MANUF CODE	DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE		EXTENDED PRICE	
294844 AVT75426	LANYARDS,HOOK 34IN 24,BE 294844			BX	1	1	0	14.290		14.29	
430496 ZE21BPZ4-D24	ERASER,CLIC,PENTEL,4PACK 430496			PK	2	2	0	3.650		7.30	
480723 7510-01-278-413	BINDERS,W/PCKTS,R/R,1",B 480723			EA	12	12	0	3.090		37.08	

	SUB-TOTAL	58.67
	DISCOUNT	0.00
	DELIVERY	0.00
	MISCELLANEOUS	0.00
	SALES TAX	0.00
ALL AMOUNTS ARE BASED ON USD CURRENCY	TOTAL	58.67

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COLG OF DUPAGE	9080291	990167056001	12/18/2017	\$58.67	

FL0 090802919 9901670560010 00000005867 1 1

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 991566232001

Invoice Date: 12/20/17

PO Number: P0355542

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00225

Reviewer Name:

Voucher Number: V0490620

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 22 17:31:07 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/16/2017 to 12/22/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/16/2017 to 12/22/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

3 WAY MATCH

Federal ID # 59-2663954

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
991566232001	\$114.29	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
12/20/2017	Net 30	01/21/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		991566232001		12/19/2017		12/20/2017	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355542				Janelle Walker		JANELLE WALKER				
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE		EXTENDED PRICE
612071 505-O004-0012		LABEL,FULL,OD,LSR,100CT, 612071			PK	2	2	0	8.990		17.98
292402 CLO35420		CLEAN-UP W/BLEACH COMM S 292402			EA	1	1	0	9.890		9.89
667858 1000039985		SANITIZER,OD,ALOE,8OZ PU 667858			EA	20	20	0	1.310		26.20
535704 535704ODB		POUCH,LAMINATING,LETTER 535704			PK	4	4	0	7.280		29.12
444970 142-6		TAPE,PKG,2"X800",6/PK,CL 444970			PK	1	1	0	12.690		12.69
267854 SJN665015		BAG,STORAGE,QUART,ZIPLOC 267854			BX	1	1	0	7.990		7.99
491658 OD491658		SHEET PROT,OD,HVY,CLR,10 491658			BX	2	2	0	5.210		10.42

ALL AMOUNTS ARE BASED ON USD CURRENCY		SUB-TOTAL	114.29
		DISCOUNT	0.00
		DELIVERY	0.00
		MISCELLANEOUS	0.00
		SALES TAX	0.00
		TOTAL	114.29

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COLG OF DUPAGE	9080291	991566232001	12/20/2017	\$114.29	

FL0 090802919 9915662320019 00000011429 1 3

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 994055453001

Invoice Date: 01/04/18

PO Number: P0355620

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00750

Reviewer Name:

Voucher Number: V0490968

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Jan 05 17:52:55 CST 2018
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/30/2017 to 01/05/2018 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/30/2017 to 01/05/2018.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
994055453001	\$10.98	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
01/04/2018	Net 30	02/04/2018

Federal D # 19-2633954

3 WAY MATCH

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		994055453001		01/03/2018		01/04/2018	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355620				Erl, Lisa		ERL, LISA				
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE		EXTENDED PRICE
496668 35399-18		REFILL,FC,2PPM,RY18,5.5X 496668			EA	1	1	0	10.980		10.98

SUB-TOTAL	10.98
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	10.98

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT
COLG OF DUPAGE	9080291	994055453001	01/04/2018	\$10.98

AMOUNT ENCLOSED

FL0 090802919 9940554530012 00000001098 1 3

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 994349202001

Invoice Date: 01/05/18

PO Number: P0355638

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00457

Reviewer Name:

Voucher Number: V0490969

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com

Sent: Fri Jan 05 17:47:27 CST 2018

To: invoicing@cod.edu

CC:

Subject: Your Electronic Billing for the period 12/30/2017 to 01/05/2018 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/30/2017 to 01/05/2018.

For questions regarding billing format, please contact billingsetup@officedepot.com.

For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:

Account Inquiries: (888) 263-3423

Order Inquiries: (800) 721-6592

3 WAY MATCH

Federal ID # 59-2663954

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
994349202001	\$58.58	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
01/05/2018	Net 30	02/04/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		994349202001		01/04/2018		01/05/2018	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355638				Salazar, Emmanuel		SALAZAR, EMMANUEL				
CATALOG ITEM # / MANUF CODE	DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE		
800576 DK2211	FILM,LABEL,1.5 X 50' 800576			EA	2	2	0	29.290	58.58		

	SUB-TOTAL	58.58
	DISCOUNT	0.00
	DELIVERY	0.00
	MISCELLANEOUS	0.00
	SALES TAX	0.00
ALL AMOUNTS ARE BASED ON USD CURRENCY	TOTAL	58.58

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COLG OF DUPAGE	9080291	994349202001	01/05/2018	\$58.58	

FLO 090802919 9943492020013 00000005858 1 9

PLEASE
SEND YOUR
CHECK TO:

OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 994055454001

Invoice Date: 01/04/18

PO Number: P0355620

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00750

Reviewer Name:

Voucher Number: V0490970

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Jan 05 17:46:42 CST 2018
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/30/2017 to 01/05/2018 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/30/2017 to 01/05/2018.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:

Account Inquiries: (888) 263-3423

Order Inquiries: (800) 721-6592

3 WAY MATCH

Federal ID # 59-2663954

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
994055454001	\$27.29	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
01/04/2018	Net 30	02/04/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		994055454001		01/03/2018		01/04/2018	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355620				Erl, Lisa		ERL, LISA				
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE	
419255 35419-18		REFILL,FC,2PPD,RY18,5.5X 419255			EA	1	1	0	27.290	27.29	

SUB-TOTAL	27.29
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	27.29

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT
COLG OF DUPAGE	9080291	994055454001	01/04/2018	\$27.29

AMOUNT ENCLOSED

FL0 090802919 9940554540011 00000002729 1 8

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 994163414001

Invoice Date: 01/04/18

PO Number: P0355627

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00461

Reviewer Name:

Voucher Number: V0490972

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com

Sent: Fri Jan 05 17:42:47 CST 2018

To: invoicing@cod.edu

CC:

Subject: Your Electronic Billing for the period 12/30/2017 to 01/05/2018 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/30/2017 to 01/05/2018.

For questions regarding billing format, please contact billingsetup@officedepot.com.

For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

3 WAY MATCH

Federal ID # 59-2663954

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
994163414001	\$214.43	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
01/04/2018	Net 30	02/04/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		994163414001		01/03/2018		01/04/2018	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355627				Christine Jandak SSC2221		CHRISTINE JANDAK SSC				
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE	
336977 65424SSMIACP		POST-IT,MIAMI,3x3,24PK 336977			PK	2	2	0	22.310	44.62	
617094 LF-60		CLIP,CUBICAL,5PK,TRNSLNT 617094			PK	5	5	0	3.030	15.15	
925971 686-PGO		FLAGS,INDEX,DURABLE,3PK, 686PGO			PK	5	5	0	4.370	21.85	
826876 WOTAP10		TAPE,CORRECTION,WITEOUT, 826876			PK	2	2	0	12.820	25.64	
648445 961135		PAD,BIFOLD,SAMSONITE,VIN 648445			EA	1	1	0	19.990	19.99	
677674 E17-00		BASE,CALENDAR,PLAS,3.5X6 677674			EA	5	5	0	12.340	61.70	
124407 AZ127C		PENCIL,MECH,E-SHARP,.7MM 124407			DZ	2	2	0	12.740	25.48	

SUB-TOTAL		214.43
DISCOUNT		0.00
DELIVERY		0.00
MISCELLANEOUS		0.00
SALES TAX		0.00
TOTAL		214.43
ALL AMOUNTS ARE BASED ON USD CURRENCY		

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COLG OF DUPAGE	9080291	994163414001	01/04/2018	\$214.43	

FL0 090802919 9941634140012 00000021443 1 4

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 994456311001

Invoice Date: 01/05/18

PO Number: P0355640

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00465

Reviewer Name:

Voucher Number: V0490973

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com

Sent: Fri Jan 05 17:46:03 CST 2018

To: invoicing@cod.edu

CC:

Subject: Your Electronic Billing for the period 12/30/2017 to 01/05/2018 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/30/2017 to 01/05/2018.

For questions regarding billing format, please contact billingsetup@officedepot.com.

For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

3 WAY MATCH

Federal ID # 59-2663954

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
994456311001	\$251.49	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
01/05/2018	Net 30	02/04/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE	SHIPPED DATE	
53286265		Depot, Office		99		994456311001		01/04/2018	01/05/2018	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER	
9080291	355640				SSC3200-Jennifer Such		SSC3200- JENNIFER SUC			
CATALOG ITEM # / MANUF CODE	DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE	
239400 TZE-231	TAPE, LETTERING, 5", BLACK 239400			EA	5	5	0	10.490	52.45	
757170 MRS21524	MINT, LIFESAVER WINTOGREN 757170			PK	8	8	0	17.890	143.12	
539033 RAC76075EA	DISINFECTANT, LYSOL SPRAY 539033			EA	8	8	0	6.990	55.92	

SUB-TOTAL	251.49
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	251.49

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COLG OF DUPAGE	9080291	994456311001	01/05/2018	\$251.49	

FL0 090802919 9944563110014 00000025149 1 2

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 994456402001

Invoice Date: 01/05/18

PO Number: P0355641

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 15065

Reviewer Name:

Voucher Number: V0490974

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com

Sent: Fri Jan 05 17:45:58 CST 2018

To: invoicing@cod.edu

CC:

Subject: Your Electronic Billing for the period 12/30/2017 to 01/05/2018 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/30/2017 to 01/05/2018.

For questions regarding billing format, please contact billingsetup@officedepot.com.

For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 994055452001

Invoice Date: 01/04/18

PO Number: P0355620

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00750

Reviewer Name:

Voucher Number: V0490975

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Jan 05 17:42:39 CST 2018
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/30/2017 to 01/05/2018 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/30/2017 to 01/05/2018.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

3 WAY MATCH

Federal ID # 59-2663954

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
994055452001	\$11.69	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
01/04/2018	Net 30	02/04/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		994055452001		01/03/2018		01/04/2018	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355620				Erl, Lisa		ERL, LISA				
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE		EXTENDED PRICE
277415 PM83-707-18		CALENDAR,MTH,RY18,15X12, 277415			EA	1	1	0	11.690		11.69

SUB-TOTAL	11.69
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	11.69

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT
COLG OF DUPAGE	9080291	994055452001	01/04/2018	\$11.69

AMOUNT ENCLOSED

FL0 090802919 9940554520013 00000001169 1 7

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 994792737001

Invoice Date: 01/04/18

PO Number: P0355387

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00466

Reviewer Name:

Voucher Number: V0490977

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Jan 05 17:40:38 CST 2018
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/30/2017 to 01/05/2018 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/30/2017 to 01/05/2018.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

3 WAY MATCH

Federal ID # 59-2663954

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
994792737001	\$32.58	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
01/04/2018	Net 30	02/04/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER	SHIP TO ID		ORDER NUMBER		ORDER DATE	SHIPPED DATE	
53286265		Depot, Office	99		994792737001		01/03/2018		01/04/2018
BILLING ID	PURCHASE ORDER	RELEASE		ORDERED BY		DESKTOP		COST CENTER	
9080291	355387			JORDAN TOWNE					
CATALOG ITEM # / MANUF CODE	DESCRIPTION / CUSTOMER ITEM #		U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE	
396241 OD02774	BINDER,OD,VIEW,RR,2",WHI 396241		EA	2	2	0	3.320	6.64	
396231 OD02773	BINDER,OD,VIEW,RR,2",BLA 396231		EA	2	2	0	2.990	5.98	
220424 505-0004-0013	LABEL,OD,DL FILE,1/3,150 220424		PK	2	2	0	9.980	19.96	

SUB-TOTAL	32.58
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	32.58

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT
COLG OF DUPAGE	9080291	994792737001	01/04/2018	\$32.58

AMOUNT ENCLOSED

FL0 090802919 9947927370018 00000003258 1 6

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 994792738001

Invoice Date: 01/04/18

PO Number: P0355387

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00466

Reviewer Name:

Voucher Number: V0490978

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Jan 05 17:41:46 CST 2018
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/30/2017 to 01/05/2018 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/30/2017 to 01/05/2018.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
994792738001	\$13.99	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
01/04/2018	Net 30	02/04/2018

Federal ID # 9-26 3994

3 WAY MATCH

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		994792738001		01/03/2018		01/04/2018	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355387				JORDAN TOWNE						
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE		EXTENDED PRICE
696874 61200		PROTECTOR,SHEET,COLORBAR 696874			PK	1	1	0	13.990		13.99

SUB-TOTAL	13.99
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	13.99

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT
COLG OF DUPAGE	9080291	994792738001	01/04/2018	\$13.99

AMOUNT ENCLOSED

FL0 090802919 9947927380017 00000001399 1 0

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 995807461001

Invoice Date: 01/09/18

PO Number: P0355696

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 15065

Reviewer Name:

Voucher Number: V0491527

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Jan 12 18:41:40 CST 2018
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 01/06/2018 to 01/12/2018 for account 53286265.



Dear Customer,

Attached is your electronic billing for 01/06/2018 to 01/12/2018.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:

Account Inquiries: (888) 263-3423

Order Inquiries: (800) 721-6592

3 WAY MATCH

Federal ID # 59-2663954

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
995807461001	\$15.10	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
01/09/2018	Net 30	02/11/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		995807461001		01/08/2018		01/09/2018	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355696				c yearman src 2102		C YEARMAN SRC 2102				
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE	
128731 SMP13012		CLEANER,DEGREASER,24-OZ 128731			EA	2	2	0	7.550	15.10	

	SUB-TOTAL	15.10
	DISCOUNT	0.00
	DELIVERY	0.00
	MISCELLANEOUS	0.00
	SALES TAX	0.00
ALL AMOUNTS ARE BASED ON USD CURRENCY	TOTAL	15.10

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COLG OF DUPAGE	9080291	995807461001	01/09/2018	\$15.10	

FLO 090802919 9958074610015 00000001510 1 7

PLEASE
SEND YOUR
CHECK TO:

OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1087302
Vendor Name: Office Depot
Invoice Number: 991043324001
Invoice Date: 12/18/17
PO Number: P0355321
Check Number: 0230102
Check Amount: \$ 9,247.77
Check Date: 01/17/2018
Department ID: 00373
Reviewer Name: Elizabeth Holmwood
Voucher Number: V0491542
Redaction Type: None
Document Type: AP Invoice

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Dec 22 17:36:56 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 12/16/2017 to 12/22/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 12/16/2017 to 12/22/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1087302
Vendor Name: Office Depot
Invoice Number: 982796798001
Invoice Date: 11/21/17
PO Number: P0354810
Check Number: 0230102
Check Amount: \$ 9,247.77
Check Date: 01/17/2018
Department ID: 00393
Reviewer Name: None
Voucher Number: V0491545
Redaction Type: None
Document Type: AP Invoice

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Nov 24 16:39:42 CST 2017
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 11/18/2017 to 11/24/2017 for account 53286265.



Dear Customer,

Attached is your electronic billing for 11/18/2017 to 11/24/2017.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 994711213001

Invoice Date: 01/08/18

PO Number: P0355647

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00821

Reviewer Name:

Voucher Number: V0491587

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Jan 12 18:41:41 CST 2018
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 01/06/2018 to 01/12/2018 for account 53286265.



Dear Customer,

Attached is your electronic billing for 01/06/2018 to 01/12/2018.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 996472334001

Invoice Date: 01/16/18

PO Number: P0355728

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00381

Reviewer Name:

Voucher Number: V0491590

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Jan 12 18:41:41 CST 2018
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 01/06/2018 to 01/12/2018 for account 53286265.



Dear Customer,

Attached is your electronic billing for 01/06/2018 to 01/12/2018.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:

Account Inquiries: (888) 263-3423

Order Inquiries: (800) 721-6592

3 WAY MATCH

Federal ID # 59-2663954

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
996472334001	\$5.80	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
01/11/2018	Net 30	02/11/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		996472334001		01/10/2018		01/11/2018	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355728				Lynn Dudzik, BIC 3520		LYNN DUDZIK, BIC 352				
CATALOG ITEM # / MANUF CODE	DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE		
305466 99401	PAD,PERF,8.5X11,OD,LGL R 305466			DZ	1	1	0	5.800	5.80		

	SUB-TOTAL	5.80
	DISCOUNT	0.00
	DELIVERY	0.00
	MISCELLANEOUS	0.00
	SALES TAX	0.00
ALL AMOUNTS ARE BASED ON USD CURRENCY	TOTAL	5.80

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COI G OF DUPAGE	9080291	996472334001	01/11/2018	\$5.80	

FLO 090802919 9964723340012 00000000580 1 2

PLEASE
SEND YOUR
CHECK TO:

OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 994906815001

Invoice Date: 01/08/18

PO Number: P0355652

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00693

Reviewer Name:

Voucher Number: V0491591

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Jan 12 18:41:45 CST 2018
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 01/06/2018 to 01/12/2018 for account 53286265.



Dear Customer,

Attached is your electronic billing for 01/06/2018 to 01/12/2018.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

3 WAY MATCH

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
994906815001	\$6.19	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
01/08/2018	Net 30	02/11/2018

Federal ID # 59-2663954

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER	SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office	99		994906815001		01/05/2018		01/08/2018	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER	
9080291	355652				K Striplin, CMC 1000		K STRIPLIN, CMC 1000			
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #		U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE	
759833 97799		FRESHNER,FBRZ,AIR,LINENS 759833		EA	1	1	0	6.190	6.19	

SUB-TOTAL	6.19
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	6.19

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT
COLG OF DUPAGE	9080291	994906815001	01/08/2018	\$6.19

AMOUNT ENCLOSED

FL0 090802919 9949068150019 00000000619 1 1

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 995726696001

Invoice Date: 01/09/18

PO Number: P0355692

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00745

Reviewer Name:

Voucher Number: V0491592

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Jan 12 18:41:46 CST 2018
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 01/06/2018 to 01/12/2018 for account 53286265.



Dear Customer,

Attached is your electronic billing for 01/06/2018 to 01/12/2018.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

3 WAY MATCH

Federal ID # 59-2663954

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
995726696001	\$30.74	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
01/09/2018	Net 30	02/11/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		995726696001		01/08/2018		01/09/2018	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355692				BIC0515a		BIC0515A				
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #		U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE		EXTENDED PRICE	
731124 100010		Planner,RY18,WkMo,5x8,Pa 731124		EA	1	1	0	13.640		13.64	
285621 R-335		POST-IT,POP UP,LN,3X3,6P 285621		PK	2	2	0	5.580		11.16	
307389 99470		PAD,STENO,6X9,GREGG,DOZ, 307389		DZ	1	1	0	5.940		5.94	

SUB-TOTAL	30.74
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	30.74

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT
COLG OF DUPAGE	9080291	995726696001	01/09/2018	\$30.74

AMOUNT ENCLOSED

FL0 090802919 9957266960014 00000003074 1 3

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 996037551001

Invoice Date: 01/10/18

PO Number: P0355704

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 16515

Reviewer Name:

Voucher Number: V0491593

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Jan 12 18:41:46 CST 2018
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 01/06/2018 to 01/12/2018 for account 53286265.



Dear Customer,

Attached is your electronic billing for 01/06/2018 to 01/12/2018.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

3 WAY MATCH

Federal ID # 59-2663954

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
996037551001	\$11.30	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
01/10/2018	Net 30	02/11/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		996037551001		01/09/2018		01/10/2018	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355704				Chuck Currier		CHUCK CURRIER				
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE	
126881 PMG772818		WALL,CAL,MTH,RY18,15X12, 126881			EA	1	1	0	11.300	11.30	

SUB-TOTAL	11.30
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	11.30

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT
COLG OF DUPAGE	9080291	996037551001	01/10/2018	\$11.30

AMOUNT ENCLOSED

FL0 090802919 9960375510019 00000001130 1 7

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 996887791001

Invoice Date: 01/12/18

PO Number: P0355743

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00449

Reviewer Name:

Voucher Number: V0491595

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Jan 12 18:38:37 CST 2018
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 01/06/2018 to 01/12/2018 for account 53286265.



Dear Customer,

Attached is your electronic billing for 01/06/2018 to 01/12/2018.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 980864017002

Invoice Date: 01/10/18

PO Number: P0355048

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 16815

Reviewer Name:

Voucher Number: V0491598

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com

Sent: Fri Jan 12 18:38:40 CST 2018

To: invoicing@cod.edu

CC:

Subject: Your Electronic Billing for the period 01/06/2018 to 01/12/2018 for account 53286265.



Dear Customer,

Attached is your electronic billing for 01/06/2018 to 01/12/2018.

For questions regarding billing format, please contact billingsetup@officedepot.com.

For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

3 WAY MATCH

Federal ID # 59-2663954

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
980864017002	\$89.10	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
01/10/2018	Net 30	02/11/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER	SHIP TO ID		ORDER NUMBER		ORDER DATE	SHIPPED DATE	
53286265		Depot, Office	99		980864017002		11/15/2017	01/10/2018	
BILLING ID	PURCHASE ORDER	RELEASE		ORDERED BY	DESKTOP		COST CENTER		
9080291	355048			Nocera, James	NOCERA, JAMES				
CATALOG ITEM # / MANUF CODE	DESCRIPTION / CUSTOMER ITEM #		U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE	
936482 EYU-00009	MICROSOFT,PEN,SURFACE,M1 936482		EA	1	1	0	89.100	89.10	

SUB-TOTAL	89.10
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	89.10

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT
COLG OF DUPAGE	9080291	980864017002	01/10/2018	\$89.10

AMOUNT ENCLOSED

FL0 090802919 9808640170020 00000008910 1 0

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 996472333001

Invoice Date: 01/12/18

PO Number: P0355728

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00381

Reviewer Name:

Voucher Number: V0491603

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Jan 12 18:38:38 CST 2018
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 01/06/2018 to 01/12/2018 for account 53286265.



Dear Customer,

Attached is your electronic billing for 01/06/2018 to 01/12/2018.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:

Account Inquiries: (888) 263-3423

Order Inquiries: (800) 721-6592

3 WAY MATCH

Federal ID # ~~50-2663054~~

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
996472333001	\$10.73	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
01/12/2018	Net 30	02/11/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		996472333001		01/10/2018		01/12/2018	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355728				Lynn Dudzik, BIC 3520		LYNN DUDZIK, BIC 352				
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE		EXTENDED PRICE
911021 SHREL310WB		CALCULATOR, DSKTP, 8DGTS 911021			EA	1	1	0	10.730		10.73

SUB-TOTAL	10.73
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	10.73

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COI G OF DUPAGE	9080291	996472333001	01/12/2018	\$10.73	

FLO 090802919 9964723330013 00000001073 1 4

PLEASE
SEND YOUR
CHECK TO:

OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 996472332001

Invoice Date: 01/11/18

PO Number: P0355728

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00381

Reviewer Name:

Voucher Number: V0491604

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Jan 12 18:38:39 CST 2018
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 01/06/2018 to 01/12/2018 for account 53286265.



Dear Customer,

Attached is your electronic billing for 01/06/2018 to 01/12/2018.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

3 WAY MATCH

Federal ID # 50-2663054

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
996472332001	\$50.91	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
01/11/2018	Net 30	02/11/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		996472332001		01/10/2018		01/11/2018	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355728				Lynn Dudzik, BIC 3520		LYNN DUDZIK, BIC 352				
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE	
210142 E92S16F4T		BATTERY,ALKALINE,MAX,AAA 210142			PK	1	1	0	9.660	9.66	
626049 E91SBP-24H		BATTERY,ALKALINE,MAX,AA, 626049			PK	1	1	0	13.670	13.67	
216871 60709		PEN,UNI-BALL,GRIP,FINE,B 216871			DZ	1	1	0	21.990	21.99	
634277 99510		Pad Legal , 5 x 8, Astd, 634277			PK	1	1	0	5.590	5.59	

SUB-TOTAL	50.91
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	50.91

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT
COLG OF DUPAGE	9080291	996472332001	01/11/2018	\$50.91

AMOUNT ENCLOSED

FL0 090802919 9964723320014 00000005091 1 3

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 995144595001

Invoice Date: 01/08/18

PO Number: P0355659

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00462

Reviewer Name:

Voucher Number: V0491605

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Jan 12 18:37:28 CST 2018
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 01/06/2018 to 01/12/2018 for account 53286265.



Dear Customer,

Attached is your electronic billing for 01/06/2018 to 01/12/2018.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:

Account Inquiries: (888) 263-3423

Order Inquiries: (800) 721-6592

3 WAY MATCH

Federal ID # 59-2663954

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
995144595001	\$19.43	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
01/08/2018	Net 30	02/11/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		995144595001		01/05/2018		01/08/2018	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355659				Nigohosian, Patricia		NIGOHOSIAN, PATRICIA				
CATALOG ITEM # / MANUF CODE	DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE		
687054	PLANNER,MTH,RY18,9X11,BL			EA	1	1	0	19.430	19.43		
702600518	687054										

SUB-TOTAL	19.43
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	19.43

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COL G OF DUPAGE	9080291	995144595001	01/08/2018	\$19.43	

FLO 090802919 9951445950012 00000001943 1 8

PLEASE
SEND YOUR
CHECK TO:

OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 996897391001

Invoice Date: 01/12/18

PO Number: P0355746

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 12931

Reviewer Name:

Voucher Number: V0491606

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Jan 12 18:37:27 CST 2018
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 01/06/2018 to 01/12/2018 for account 53286265.



Dear Customer,

Attached is your electronic billing for 01/06/2018 to 01/12/2018.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:

Account Inquiries: (888) 263-3423

Order Inquiries: (800) 721-6592

3 WAY MATCH

Federal ID # 59-2663954

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
996897391001	\$16.99	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
01/12/2018	Net 30	02/11/2018

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		996897391001		01/11/2018		01/12/2018	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355746				S. Hernandez, SSC1217		S. HERNANDEZ, SSC121				
CATALOG ITEM # / MANUF CODE	DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE		
409509 TZEMQ835	TAPE,LABEL,WHITE ON SATI 409509			EA	1	1	0	16.990	16.99		

SUB-TOTAL	16.99
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	16.99

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COI G OF DUPAGE	9080291	996897391001	01/12/2018	\$16.99	

FLO 090802919 9968973910010 00000001699 1 9

PLEASE
SEND YOUR
CHECK TO:

OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 995155856001

Invoice Date: 01/08/18

PO Number: P0355662

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00577

Reviewer Name:

Voucher Number: V0491607

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Jan 12 18:34:15 CST 2018
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 01/06/2018 to 01/12/2018 for account 53286265.



Dear Customer,

Attached is your electronic billing for 01/06/2018 to 01/12/2018.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 996473079001

Invoice Date: 01/11/18

PO Number: P0355729

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00453

Reviewer Name:

Voucher Number: V0491608

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Jan 12 18:26:50 CST 2018
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 01/06/2018 to 01/12/2018 for account 53286265.



Dear Customer,

Attached is your electronic billing for 01/06/2018 to 01/12/2018.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

3 WAY MATCH

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
996473079001	\$144.84	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
01/11/2018	Net 30	02/11/2018

Federal ID # 59-2663954

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		996473079001		01/10/2018		01/11/2018	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355729				Natalie Haraus BIC 1500		NATALIE HARAUS BIC 1				
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE		EXTENDED PRICE
328649 80004		MARKER,CHISEL TIP,EXPO 2 328649			DZ	12	12	0	12.070		144.84

SUB-TOTAL	144.84
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	144.84

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT
COLG OF DUPAGE	9080291	996473079001	01/11/2018	\$144.84

AMOUNT ENCLOSED

FL0 090802919 9964730790019 00000014484 1 5

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 995539136001

Invoice Date: 01/09/18

PO Number: P0355666

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 15240

Reviewer Name:

Voucher Number: V0491609

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Jan 12 18:26:50 CST 2018
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 01/06/2018 to 01/12/2018 for account 53286265.



Dear Customer,

Attached is your electronic billing for 01/06/2018 to 01/12/2018.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

3 WAY MATCH

Federal ID # 59-2003934

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
995539136001	\$149.63	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
01/09/2018	Net 30	02/11/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		995539136001		01/08/2018		01/09/2018	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355666				Library- Haines, Nancy		LIBRARY- HAINES, NAN				
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE	
149407 CLO01599		WIPES,DISINFECTING,2PK 149407			PK	4	4	0	9.490	37.96	
958033 845-1-1/2		TAPE,BOOK MENDING 1.5X15 958033			RL	1	1	0	7.990	7.99	
910638 845-R2		TAPE,BOOK,TRANS,2"X15YD 910638			RL	24	24	0	4.320	103.68	

SUB-TOTAL	149.63
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	149.63

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT
COLG OF DUPAGE	9080291	995539136001	01/09/2018	\$149.63

AMOUNT ENCLOSED

FL0 090802919 9955391360019 00000014963 1 7

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 995962270001

Invoice Date: 01/10/18

PO Number: P0355699

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00825

Reviewer Name:

Voucher Number: V0491610

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Jan 12 18:26:37 CST 2018
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 01/06/2018 to 01/12/2018 for account 53286265.



Dear Customer,

Attached is your electronic billing for 01/06/2018 to 01/12/2018.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 996447479001

Invoice Date: 01/11/18

PO Number: P0355723

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00393

Reviewer Name:

Voucher Number: V0491612

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Jan 12 18:24:46 CST 2018
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 01/06/2018 to 01/12/2018 for account 53286265.



Dear Customer,

Attached is your electronic billing for 01/06/2018 to 01/12/2018.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:

Account Inquiries: (888) 263-3423

Order Inquiries: (800) 721-6592

3 WAY MATCH

~~Federal ID # 53-2063354~~

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
996447479001	\$26.97	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
01/11/2018	Net 30	02/11/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		996447479001		01/10/2018		01/11/2018	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355723				A. Knez SRC 1107		A. KNEZ SRC 1107				
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #		U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE		EXTENDED PRICE	
221720 10008		CLIP,PPR,#1,PRM SMTH,OD, 221720		PK	1	1	0	2.400		2.40	
213940 4137		TAPE,DBL SIDED,1/2"X400" 213940		PK	1	1	0	15.190		15.19	
221720 10008		CLIP,PPR,#1,PRM SMTH,OD, 221720		PK	1	1	0	2.400		2.40	
987388 BK90PCA-D12		PEN,BALLPOINT,FINE,BLK 987388		DZ	1	1	0	4.490		4.49	
725163 400-003-269		BOOK,COMP,WR,100S,3PK 725163		PK	1	1	0	2.490		2.49	

SUB-TOTAL	26.97
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	26.97

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COI G OF DUPAGE	9080291	996447479001	01/11/2018	\$26.97	

FLO 090802919 9964474790019 00000002697 1 8

PLEASE
SEND YOUR
CHECK TO:

OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 996549197001

Invoice Date: 01/11/18

PO Number: P0355731

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 15065

Reviewer Name:

Voucher Number: V0491613

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com

Sent: Fri Jan 12 18:24:56 CST 2018

To: invoicing@cod.edu

CC:

Subject: Your Electronic Billing for the period 01/06/2018 to 01/12/2018 for account 53286265.



Dear Customer,

Attached is your electronic billing for 01/06/2018 to 01/12/2018.

For questions regarding billing format, please contact billingsetup@officedepot.com.

For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

3 WAY MATCH

Federal ID # 50-2088851

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
996549197001	\$27.23	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
01/11/2018	Net 30	02/11/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		996549197001		01/10/2018		01/11/2018	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355731				c yearman src 2102		C YEARMAN SRC 2102				
CATALOG ITEM # / MANUF CODE	DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE		
399905 SP24D0018	Deskpads,M,22X17,1C,OD,RY 399905			EA	1	1	0	2.400	2.40		
203356 30002	MARKER,SHARPIE,FINE,DZ,R 203356			DZ	1	1	0	8.100	8.10		
203349 30001	MARKER,SHARPIE,FINE,DZ,B 203349			DZ	1	1	0	8.100	8.10		
925531 30075	MARKER,SHARPIE,FINE,12/P 925531			PK	1	1	0	8.630	8.63		

SUB-TOTAL	27.23
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	27.23

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COLG OF DUPAGE	9080291	996549197001	01/11/2018	\$27.23	

FL0 090802919 9965491970013 00000002723 1 4

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 995539137002

Invoice Date: 01/09/18

PO Number: P0355666

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 15240

Reviewer Name:

Voucher Number: V0491615

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Jan 12 18:24:32 CST 2018
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 01/06/2018 to 01/12/2018 for account 53286265.



Dear Customer,

Attached is your electronic billing for 01/06/2018 to 01/12/2018.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

3 WAY MATCH

Federal ID # 59-2663954

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
995539137002	\$8.44	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
01/09/2018	Net 30	02/11/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		995539137002		01/08/2018		01/09/2018	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355666				Library- Haines, Nancy		LIBRARY- HAINES, NAN				
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE	
168315 E0175018		DESK,CAL,RFL,DY,RY18,3,5 168315			EA	1	1	0	8.440	8.44	

SUB-TOTAL	8.44
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	8.44

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT
COLG OF DUPAGE	9080291	995539137002	01/09/2018	\$8.44

AMOUNT ENCLOSED

FL0 090802919 9955391370026 00000000844 1 4

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 996635154001

Invoice Date: 01/11/18

PO Number: P0355732

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 14625

Reviewer Name:

Voucher Number: V0491616

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com

Sent: Fri Jan 12 18:24:42 CST 2018

To: invoicing@cod.edu

CC:

Subject: Your Electronic Billing for the period 01/06/2018 to 01/12/2018 for account 53286265.



Dear Customer,

Attached is your electronic billing for 01/06/2018 to 01/12/2018.

For questions regarding billing format, please contact billingsetup@officedepot.com.

For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 994921951001

Invoice Date: 01/08/18

PO Number: P0355656

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00385

Reviewer Name:

Voucher Number: V0491617

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Jan 12 18:24:44 CST 2018
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 01/06/2018 to 01/12/2018 for account 53286265.



Dear Customer,

Attached is your electronic billing for 01/06/2018 to 01/12/2018.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

3 WAY MATCH

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
994921951001	\$18.39	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
01/08/2018	Net 30	02/11/2018

Federal ID # 59-2663954

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		994921951001		01/05/2018		01/08/2018	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355656				Frison-Cook, Dawn		FRISON-COOK, DAWN				
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE	
984690 5309		CARD,LSR,TENT,LRG,50CT 984690			BX	1	1	0	18.390	18.39	

SUB-TOTAL	18.39
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	18.39

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT
COLG OF DUPAGE	9080291	994921951001	01/08/2018	\$18.39

AMOUNT ENCLOSED

FL0 090802919 9949219510012 00000001839 1 2

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 996110494001

Invoice Date: 01/10/18

PO Number: P0355712

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 14025

Reviewer Name:

Voucher Number: V0491618

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Jan 12 18:24:43 CST 2018
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 01/06/2018 to 01/12/2018 for account 53286265.



Dear Customer,

Attached is your electronic billing for 01/06/2018 to 01/12/2018.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:

Account Inquiries: (888) 263-3423

Order Inquiries: (800) 721-6592

3 WAY MATCH

Federal ID # 59-2663954

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
996110494001	\$159.30	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
01/10/2018	Net 30	02/11/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER	SHIP TO ID		ORDER NUMBER		ORDER DATE	SHIPPED DATE	
53286265		Depot, Office	99		996110494001		01/09/2018	01/10/2018	
BILLING ID	PURCHASE ORDER	RELEASE		ORDERED BY		DESKTOP		COST CENTER	
9080291	355712			Ashley McLaughlin		ASHLEY MCLAUGHLIN			
CATALOG ITEM # / MANUF CODE	DESCRIPTION / CUSTOMER ITEM #		U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE	
427151 999/ODP-MPB	PUNCH,3HOLE,ADJ RUBBER H 427151		EA	2	2	0	4.610	9.22	
450073 9652-12	HAND SANTZR,INSTANT,8OZ, 450073		EA	8	8	0	3.270	26.16	
262465 35038	TISSUE,PUFFS,FACIAL,WH 262465		CT	1	1	0	39.190	39.19	
149407 CLO01599	WIPES,DISINFECTING,2PK 149407		PK	2	2	0	9.490	18.98	
182741 8430152	PEN,FLAIR,PNTGRD,DZ,BLK 182741		DZ	1	1	0	11.790	11.79	
182725 84101	PEN,FLAIR,W/PNTGRD,BLUE, 182725		DZ	1	1	0	12.990	12.99	
182733 8420152	PEN,FLAIR,W/POINTGUARD,D 182733		DZ	1	1	0	12.990	12.99	
257191 8450152	PEN,FLAIR,W/POINTGUARD,P 257191		DZ	1	1	0	12.990	12.99	
298983 37300	SORTER,LG,SJW,HERR,BLU 298983		EA	1	1	0	14.990	14.99	

SUB-TOTAL	159.30
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	159.30

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
CO LG OF DUPAGE	9080291	996110494001	01/10/2018	\$159.30	

FLO 090802919 9961104940014 00000015930 1 3

PLEASE
SEND YOUR
CHECK TO:

OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 996897390001

Invoice Date: 01/12/18

PO Number: P0355746

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 12931

Reviewer Name:

Voucher Number: V0491619

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Jan 12 18:22:57 CST 2018
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 01/06/2018 to 01/12/2018 for account 53286265.



Dear Customer,

Attached is your electronic billing for 01/06/2018 to 01/12/2018.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
996897390001	\$219.88	2 of 2
INVOICE DATE	TERMS	PAYMENT DUE
01/12/2018	Net 30	02/11/2018

Federal ID # 59-2663954

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		996897390001		01/11/2018		01/12/2018	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355746				S. Hernandez, SSC1217		S. HERNANDEZ, SSC121				
CATALOG ITEM # / MANUF CODE	DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE		

ALL AMOUNTS ARE BASED ON USD CURRENCY	SUB-TOTAL	219.88
	DISCOUNT	0.00
	DELIVERY	0.00
	MISCELLANEOUS	0.00
	SALES TAX	0.00
	TOTAL	219.88

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COLG OF DUPAGE	9080291	996897390001	01/12/2018	\$219.88	

FL0 090802919 9968973900011 00000021988 1 7

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 995689787001

Invoice Date: 01/09/18

PO Number: P0355684

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00797

Reviewer Name:

Voucher Number: V0491621

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com

Sent: Fri Jan 12 18:21:42 CST 2018

To: invoicing@cod.edu

CC:

Subject: Your Electronic Billing for the period 01/06/2018 to 01/12/2018 for account 53286265.



Dear Customer,

Attached is your electronic billing for 01/06/2018 to 01/12/2018.

For questions regarding billing format, please contact billingsetup@officedepot.com.

For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

3 WAY MATCH

Federal D # 59-2663954

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
995689787001	\$84.36	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
01/09/2018	Net 30	02/11/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		995689787001		01/08/2018		01/09/2018	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355684				Campagnolo, Jacquelyn		CAMPAGNOLO, JACQUELY				
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE	
698860 OD698860		COVER,PORTFOLIO,11.75X9. 698860			BX	4	4	0	6.070	24.28	
443296 OD-35Y		NOTE OD,3X5,YLW,12PK 443296			PK	2	2	0	6.550	13.10	
143162 45331H		COVER,DOCUMENT,6PK,BLACK 45331H			PK	6	6	0	5.790	34.74	
331064 77925		ENVELOPE,GRIP-SEAL,10X13 331064			BX	1	1	0	12.240	12.24	

SUB-TOTAL	84.36
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	84.36

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COLG OF DUPAGE	9080291	995689787001	01/09/2018	\$84.36	

FL0 090802919 9956897870014 00000008436 1 7

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 996887296001

Invoice Date: 01/12/18

PO Number: P0355742

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 17100

Reviewer Name:

Voucher Number: V0491635

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Jan 12 18:21:11 CST 2018
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 01/06/2018 to 01/12/2018 for account 53286265.



Dear Customer,

Attached is your electronic billing for 01/06/2018 to 01/12/2018.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:

Account Inquiries: (888) 263-3423

Order Inquiries: (800) 721-6592

3 WAY MATCH

~~Federal ID # 50 2663054~~

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
996887296001	\$21.69	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
01/12/2018	Net 30	02/11/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		996887296001		01/11/2018		01/12/2018	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355742				Vena, Sue		VENA, SUE				
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE		EXTENDED PRICE
3131404 AVT97096		HOLDER,BADGE,GVT/MLTRY,H 3131404			PK	1	1	0	21.690		21.69

	SUB-TOTAL	21.69
	DISCOUNT	0.00
	DELIVERY	0.00
	MISCELLANEOUS	0.00
	SALES TAX	0.00
ALL AMOUNTS ARE BASED ON USD CURRENCY	TOTAL	21.69

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
CO LG OF DUPAGE	9080291	996887296001	01/12/2018	\$21.69	

FLO 090802919 9968872960017 00000002169 1 6

PLEASE
SEND YOUR
CHECK TO:

OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 995155855001

Invoice Date: 01/08/18

PO Number: P0355662

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00577

Reviewer Name:

Voucher Number: V0491637

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Jan 12 18:21:11 CST 2018
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 01/06/2018 to 01/12/2018 for account 53286265.



Dear Customer,

Attached is your electronic billing for 01/06/2018 to 01/12/2018.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

3 WAY MATCH

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

Federal ID # 59-2663954

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
995155855001	\$108.94	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
01/08/2018	Net 30	02/11/2018

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		995155855001		01/05/2018		01/08/2018	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355662				Hull, Amy		HULL, AMY				
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #		U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE		
810945 OM97189/810945 O		FOLDER,HNG,LGL,1/3CUT,25 810945		BX	4	4	0	6.800	27.20		
399905 SP24D0018		Deskpads,M,22X17,1C,OD,RY 399905		EA	2	2	0	2.400	4.80		
601066 10697		TAPE,LETRATAG,2-PK,WHT 601066		PK	3	3	0	4.900	14.70		
231769 64600		TAB,HNG FLDR,1/5CUT,25PK 231769		PK	2	2	0	0.930	1.86		
307645 201-3000-06		TAG,KEY,WHITE 307645		PK	2	2	0	5.590	11.18		
568419 OD-HM50-6		TAPE,PACKAGING,OD,6/PK 568419		PK	1	1	0	16.540	16.54		
745021 4011		TAPE,MOUNT,EXT,S/STRONG, 745021		EA	2	1	0	4.890	4.89		
580327 61232		PEN,UBALL,VIS,ELITE,DZ,B 580327		DZ	1	1	0	24.800	24.80		
855946 2464408		RUBBERBANDS,SZ64,1# 855946		BG	1	1	0	2.970	2.97		

SUB-TOTAL	108.94
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	108.94

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COL G OF DUPAGE	9080291	995155855001	01/08/2018	\$108.94	

FL0 090802919 9951558550013 00000010894 1 0

PLEASE
SEND YOUR
CHECK TO:

OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 994906814001

Invoice Date: 01/08/18

PO Number: P0355652

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00693

Reviewer Name:

Voucher Number: V0491639

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Jan 12 18:17:52 CST 2018
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 01/06/2018 to 01/12/2018 for account 53286265.



Dear Customer,

Attached is your electronic billing for 01/06/2018 to 01/12/2018.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.

Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:

Account Inquiries: (888) 263-3423

Order Inquiries: (800) 721-6592

3 WAY MATCH

Federal ID # 59-2663954

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
994906814001	\$158.75	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
01/08/2018	Net 30	02/11/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		994906814001		01/05/2018		01/08/2018	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355652				K Striplin, CMC 1000		K STRIPLIN, CMC 1000				
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #		U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE		EXTENDED PRICE	
333036 KCC21005PK		KLEENEX,FACIAL TISSUE,BU 333036		PK	4	4	0	6.390		25.56	
319943 PGC35045CT		TISSUE,FACIAL,PUFFS,ULTR 319943		PK	2	2	0	5.990		11.98	
306959 RAC93010		WIPES,DISINFECTING,OCEAN 306959		EA	3	3	0	7.190		21.57	
422469 RAC04675EA		LYSOL SPRAY,FRESH SCENT, 422469		EA	3	3	0	6.010		18.03	
172777 45112EA		CLEANER,DISHWSH,DAWN,38O 172777		EA	6	6	0	5.690		34.14	
121904 96254		SPRAY,AIR,FBRZ,SPRGRNWL, 121904		EA	2	2	0	3.990		7.98	
843485 96260EA		SPRAY,AIR,FBRZ,HAWNALHA, 843485		EA	2	2	0	3.990		7.98	
854656 GOJ962504		purell prof original 854656		EA	1	1	0	24.870		24.87	
426300 GOJ 9552-12		SANITIZER,PURELL,8OZ,PUM 426300		EA	2	2	0	3.320		6.64	

	SUB-TOTAL	158.75
	DISCOUNT	0.00
	DELIVERY	0.00
	MISCELLANEOUS	0.00
	SALES TAX	0.00
ALL AMOUNTS ARE BASED ON USD CURRENCY	TOTAL	158.75

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COI G OF DUPAGE	9080291	994906814001	01/08/2018	\$158.75	

FLO 090802919 9949068140010 00000015875 1 0

PLEASE
SEND YOUR
CHECK TO:

OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 995192213001

Invoice Date: 01/08/18

PO Number: P0355664

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00413

Reviewer Name:

Voucher Number: V0491640

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Jan 12 18:17:53 CST 2018
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 01/06/2018 to 01/12/2018 for account 53286265.



Dear Customer,

Attached is your electronic billing for 01/06/2018 to 01/12/2018.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

3 WAY MATCH

Federal ID # 59-2663954

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
995192213001	\$35.30	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
01/08/2018	Net 30	02/11/2018

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		995192213001		01/05/2018		01/08/2018	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355664				BIC 3B13A		BIC 3B13A				
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	EXTENDED PRICE	
189217 PIL35011		Q1 PEN,BALL,PT,FINE,BP-S 189217			DZ	1	1	0	13.990	13.99	
112391 05202		LABEL,FILE FOLDER,WHT,25 112391			PK	1	1	0	2.960	2.96	
593605 5032315		CORRECTAPE,DRYLINE,MINI, 593605			PK	1	1	0	9.890	9.89	
925491 30072		MARKER,SHARPIE,FINE,12 C 925491			ST	1	1	0	8.460	8.46	

SUB-TOTAL	35.30
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	35.30

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT ENCLOSED
COLG OF DUPAGE	9080291	995192213001	01/08/2018	\$35.30	

FL0 090802919 9951922130013 00000003530 1 2

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1087302

Vendor Name: Office Depot

Invoice Number: 995155855002

Invoice Date: 01/09/18

PO Number: P0355662

Check Number: 0230102

Check Amount: \$ 9,247.77

Check Date: 01/17/2018

Department ID: 00577

Reviewer Name:

Voucher Number: V0491642

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: no_reply_ebilledge@officedepot.com
Sent: Fri Jan 12 18:17:53 CST 2018
To: invoicing@cod.edu
CC:
Subject: Your Electronic Billing for the period 01/06/2018 to 01/12/2018 for account 53286265.



Dear Customer,

Attached is your electronic billing for 01/06/2018 to 01/12/2018.
For questions regarding billing format, please contact billingsetup@officedepot.com.
For account related questions, please call 1-800-721-6592.

Thank You,
Office Depot

Disclaimer: The attached file is construed as a legally binding document between Office DEPOT and its customer, and is not intended for anyone other than the intended recipient. If you are not the intended recipient, please forward this email back to billingsetup@officedepot.com.



Office Depot, Inc
PO BOX 630813
CINCINNATI OH
45263-0813

ORIGINAL INVOICE

10000

THANKS FOR YOUR ORDER

3 WAY MATCH

Contact Number For:
Account Inquiries: (888) 263-3423
Order Inquiries: (800) 721-6592

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
995155855002	\$4.89	1 of 1
INVOICE DATE	TERMS	PAYMENT DUE
01/09/2018	Net 30	02/11/2018

Federal ID # 59-2663954

Bill To: ATTN: ACCTS PAYABLE
COLG OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
|||

Ship To : COLLEGE OF DUPAGE SHIPPI
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599

ACCOUNT NUMBER		ACCOUNT MANAGER		SHIP TO ID		ORDER NUMBER		ORDER DATE		SHIPPED DATE	
53286265		Depot, Office		99		995155855002		01/05/2018		01/09/2018	
BILLING ID	PURCHASE ORDER		RELEASE		ORDERED BY		DESKTOP		COST CENTER		
9080291	355662				Hull, Amy		HULL, AMY				
CATALOG ITEM # / MANUF CODE		DESCRIPTION / CUSTOMER ITEM #			U/M TAX	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE		EXTENDED PRICE
745021 4011		TAPE,MOUNT,EXT,S/STRONG, 745021			EA	1	1	0	4.890		4.89

SUB-TOTAL	4.89
DISCOUNT	0.00
DELIVERY	0.00
MISCELLANEOUS	0.00
SALES TAX	0.00
TOTAL	4.89

ALL AMOUNTS ARE BASED ON USD CURRENCY

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

▲ DETACH HERE ▲

CUSTOMER NAME	BILLING ID	INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT
COLG OF DUPAGE	9080291	995155855002	01/09/2018	\$4.89

AMOUNT ENCLOSED

FL0 090802919 9951558550021 00000000489 1 5

PLEASE
SEND YOUR
CHECK TO:
OFFICE DEPOT
PO BOX 88040
CHICAGO IL 60680-1040

PLEASE RETURN THIS STUB WITH YOUR PAYMENT TO
ENSURE PROMPT CREDIT TO YOUR ACCOUNT.

PLEASE DO NOT STAPLE OR FOLD. THANK YOU