

Information:

Drawer: Accounts Payable - Invoices  
Vendor Number: 1194810  
Vendor Name: Roy Houff Co., Llc  
Invoice Number: 102027273  
Invoice Date: 01/22/18  
PO Number: B0353521  
Check Number: E0065187  
Check Amount: \$ 287.00  
Check Date: 01/31/2018  
Department ID: 00077  
Reviewer Name: Linda Hickman  
Voucher Number: V0492079  
Redaction Type: None  
Document Type: AP Invoice

Document Below

-----  
From: PRN217@cod.edu  
Sent: Tue Jan 23 09:57:36 CST 2018  
To: hickmanl@cod.edu, invoicing@cod.edu  
CC:  
Subject: Scanned from a Xerox Multifunction Device  
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# The Roy Houff Company

THE PROFESSIONAL FLORIST'S CHOICE FOR QUALITY

6200 South Oak Park Ave. Chicago IL 60638 - 773-586-8118 Fax - 773-586-8100

C9500  
COLLEGE OF DUPAGE, C9500  
425 FAWELL BLVD  
GLEN ELLYN IL 60137

## PLEASE REMIT TO:

6200 S. OAK PARK AVE.  
CHICAGO, IL 60638



## SPECIAL INSTRUCTIONS

\*\*\*Invoice\*\*\*  
For office use only: 1161007

## INVOICE

NO.	DATE
102027273	Jan 22, 18

S  
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COLLEGE OF DUPAGE  
425 FAWELL BLVD  
GLEN ELLYN IL 60137

SALESPERSON	ORDER DATE	ROUTE	CUST. P.O.	SELECTOR	PACKER	TERMS
RICK HANCASKY	Jan 22.18	0116				A
2	ITEM	DESCRIPTION	SHIPPED	PRICE	UNIT	EXTENSION
1	6W-T14000	MEDIUM BABY PLANTER ASST	10	3.25	EACH	32.50

Examine flowers carefully.  
All quality issues must be  
reported by phone within 24  
hours of receipt of flowers.

0.00  
0.00  
0.00  
0.00

**APPROVED**  
**01/24/18 - KRISTINE FAY**

**INVOICE REVIEWED**  
**OKAY TO PAY**  
**LINDA HICKMAN 01/24/18**

OK to pay  
BO 353521  
\$ 32.50  
Amy H

QUANTITY	PRICE	DISC	TAX	TOTAL DUE
1	32.50	0.00	0.00	32.50

COPIES  
RECEIVED

By:

NET 30 EOM

\*\*\*Invoice\*\*\*

Information:

Drawer: Accounts Payable - Invoices  
Vendor Number: 1194810  
Vendor Name: Roy Houff Co., Llc  
Invoice Number: 102027279  
Invoice Date: 01/22/18  
PO Number: B0353521  
Check Number: E0065187  
Check Amount: \$ 287.00  
Check Date: 01/31/2018  
Department ID: 00077  
Reviewer Name: Linda Hickman  
Voucher Number: V0492098  
Redaction Type: None  
Document Type: AP Invoice

Document Below

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# Roy Houff Company

PROFESSIONAL FLORIST'S CHOICE FOR QUALITY

h Oak Park Ave, Chicago IL 60638 - 773-586-8118 Fax - 773-586-8786

## PLEASE REMIT TO:

6200 S. OAK PARK AVE.  
CHICAGO, IL 60638

## SPECIAL INSTRUCTIONS

\*\*\*Invoice\*\*\*  
For office use only: 1161010

## INVOICE

NO.	DATE
102027279	Jan 22, 18



SHIP TO

COLLEGE OF DUPAGE  
425 FAWELL BLVD  
GLEN ELLYN IL 60137

SALESPERSON	ORDER DATE	ROUTE	CUST. P.O.	SELECTOR	PACKER	TERMS
ICK HANCASKY	Jan 22.18	0116	FLORAL 1 CLASS			A
ITEM		DESCRIPTION	SHIPPED	PRICE	UNIT	EXTENSION
2230		LEATHER LEAVES BUNCH	25	3.25	EACH	81.25
1430		CARNATION IMPORTED FANCY	75	0.38	EACH	28.50
1685		CARNATION IMPORTED MINI BUNCH	4	4.50	EACH	18.00
1840		CHRYSANTHEMUM POMP DAISY BUNCH	3	3.25	EACH	9.75
3939		MILLION STAR GYPSOPHILA	2	6.00	BUNC	12.00
3040		MONTE CASINO	3	5.50	EACH	16.50

Examine flowers carefully.  
All quality issues must be  
reported by phone within 24  
hours of receipt of flowers.  
Freight Surcharge

0.00  
0.00  
0.00  
0.00  
2.50

**APPROVED**

**01/24/18 - KRISTINE FAY**

**INVOICE REVIEWED**

**OKAY TO PAY**

**LINDA HICKMAN 01/24/18**

OK to pay  
353521

\$183.50  
Amount

PIECES  
CEIVED

2 By:

NET 30 EOM

\*\*\*Invoice\*\*\*

163.50 13.00 2.00 0.00 183.50

Information:

Drawer: Accounts Payable - Invoices  
Vendor Number: 1194810  
Vendor Name: Roy Houff Co., Llc  
Invoice Number: 102027312  
Invoice Date: 01/22/18  
PO Number: B0353521  
Check Number: E0065187  
Check Amount: \$ 287.00  
Check Date: 01/31/2018  
Department ID: 00077  
Reviewer Name: Linda Hickman  
Voucher Number: V0492099  
Redaction Type: None  
Document Type: AP Invoice

Document Below

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# The Roy Houff Company

THE PROFESSIONAL FLORIST'S CHOICE FOR QUALITY

2201 W Hubbard St Chicago IL 60616 - 312-243-7200 Fax - 312-243-8816

C9500  
COLLEGE OF DUPAGE, C9500  
425 FAWELL BLVD  
GLEN ELLYN IL 60137

## PLEASE REMIT TO:

6200 S. OAK PARK AVE.  
CHICAGO, IL 60638

## SPECIAL INSTRUCTIONS

\*\*\*Invoice\*\*\*

For office use only: 1161053

## INVOICE

NO.	DATE
102027312	Jan 22, 18



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COLLEGE OF DUPAGE  
425 FAWELL BLVD  
GLEN ELLYN IL 60137

SALESPERSON	ORDER DATE	ROUTE	CUST. P.O.	SELECTOR	PACKER	TERMS
RICK HANCASKY	Jan 22, 18	0116				A
ITEM		DESCRIPTION	SHIPPED	PRICE	UNIT	EXTENSION
1	2400	MYRTLE BUNCH	2	6.00	EACH	12.00
2	1430	CARNATION IMPORTED FANCY	50	0.38	EACH	19.00
3	1840	CHRYSANTHEMUM POMP DAISY BUNCH	3	3.25	EACH	9.75
4	3939	MILLION STAR GYPSOPHILA	1	6.00	BUNC	6.00

Examine flowers carefully.  
All quality issues must be  
reported by phone within 24  
hours of receipt of flowers.

0.00  
0.00  
0.00  
0.00

**APPROVED**  
**01/24/18 - KRISTINE FAY**

OK to pay  
BO 35321  
\$46.75  
Amy Hall

**INVOICE REVIEWED**  
**OKAY TO PAY**  
**LINDA HICKMAN 01/24/18**

CES  
IVED By: \_\_\_\_\_

MERCH.	DELIVERY	PACKING	TAX	TOTAL DUE
46.75	0.00	0.00	0.00	46.75

NET 30 EOM

\*\*\*Invoice\*\*\*

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1194810

Vendor Name: Roy Houff Co., Llc

Invoice Number: 102021684

Invoice Date: 12/12/17

PO Number:

Check Number: E0065187

Check Amount: \$ 287.00

Check Date: 01/31/2018

Department ID: 99372

Reviewer Name:

Voucher Number: V0492142

Redaction Type: None

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

Document Below

## College of DuPage - Accounts Payable

## Check Request Form

revised 3/27/17

This form may be used to request check payments only for those items for which the issuance of a purchase order would not be appropriate. Attach supporting documentation (e.g., invoice or agreement). Please refer to Vendor Payment - Check Request Procedure No. 10-65

Date: 1/8/2017

Vendor ID: 1194810

Invoice Number	P.O. Number/ Req. Number	Fund	Func.	Dept.	Object	Object Descrip.	Amount
		10	99	99372	2900099	Funds Held in Custody of Othr	\$ 24.25

Grand Total

\$ 24.25

**AP VERIFIED**

Check the appropriate box below and sign

☒ **01/24/18 BETHANY CRUSE** We, the undersigned, hereby certify that the goods/services, for which payment is herein requested, have been provided in a satisfactory condition/manner. Consequently, payment is appropriate at this time.

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

Payee Name: The Roy Houff Company

Other  
Instructions:Payee Address: 6200 S. Oak Park Avenue; Chicago, IL  
60638

## Description on Check:

Payment for flowers ordered by Horticulture Club.

## Approvals:

Prepared By: Shannon Hernandez

Approved By: Chuck Steele

Date:

Signature:

Signature:

Payment Due: 1/19/2017

Approved By:

Date:

Board Approved Date:

Signature:

Approved By Division VP:

Date:

Signature:

Return Approved Request and All Supporting Documents to: Accounts Payable (SRC 2132 A), [acctpay@cod.edu](mailto:acctpay@cod.edu)

01.17.1

0.334

#1194810

# The Roy Houff Company

2201 W Hubbard St Chicago IL 60616 - 312-243-7200 Fax - 312-243-8816

C9500

COLLEGE OF DUPAGE, C9500

425 FAWELL BLVD

GLEN ELLYN IL 60137

**PLEASE REMIT TO:**6200 S. OAK PARK AVE.  
CHICAGO, IL 60638**SPECIAL INSTRUCTIONS**

\*\*\*Invoice\*\*\*

For office use only - 1154847

**INVOICE**

NO.

DATE

102021684

Dec 12, 17



SHIP TO

COLLEGE OF DUPAGE

425 FAWELL BLVD

GLEN ELLYN IL 60137

SHIPPERSON	ORDER DATE	ROUTE	CUST. P.O.	SELECTION	PACKER	TERMS
ATC HANCASKY	Dec 12, 17	0199	HORT. DEPT			A
ITEM	DESCRIPTION	SHIPPED	PRICE	UNIT	EXTENSION	
1 1430	CARNATION IMPORTED FANCY	25	0.45 ✓	EACH	11.25	
2 1820	CHRYSANTHEMUM POMP CUSHION BUNCH	2	3.25 ✓	EACH	6.50	
3 3939	MILLION STAR GYPSOPHILA	1	6.50 ✓	BUNC	6.50	

Examine flowers carefully.  
All quality issues must be  
reported by phone within 24  
hours of receipt of flowers.

0.0  
0.0  
0.0  
0.0

*Marty Bartz*



By: \_\_\_\_\_

MERCH.	DELIVERY	PACKING	TAX	TOTAL DUE
24.25	0.00	0.00	0.00	24.25
NET 30 EOM				

\*\*\*Invoice\*\*\*