

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1083343

Vendor Name: CCH Inc.

Invoice Number: 4803578320

Invoice Date: 02/26/18

PO Number:

Check Number: 0234799

Check Amount: \$ 212.36

Check Date: 04/11/2018

Department ID: 15240

Reviewer Name:

Voucher Number: V0499667

Redaction Type: None

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

Document Below

Rossetti, Cynthia

From: acctpay@cod.edu
Sent: Wednesday, March 07, 2018 12:03 PM
To: Rossetti, Cynthia
Subject: Voucher Confirmation: V0499667

Voucher Number V0499667
Voucher Status In Progress (Unfinished)

Requestor Name Ms Cynthia Rossetti

Voucher Date 03/07/18
Due Date 03/07/18
Vendor ID and/or Name 1083343 CCH Inc.
AP Type IM Invoices < \$15,000
Voucher Total \$212.36

ITEM 1

Item Description Book - Family law for paralegals
Quantity 1.000
Price \$189.9500
Extended Price \$189.95
GL Distribution 01-20-15240-5405001

ITEM 2

Item Description Shipping
Quantity 1.000
Price \$22.4100
Extended Price \$22.41
GL Distribution 01-20-15240-5405001

COMMENTS

Please note new REMITTANCE ADDRESS:
P.O. Box 71882
Chicago, IL 60694-1882

APPROVAL

DATE

NEXT APPROVALS

Jennifer M. B. / 102
3/21/18

AP VERIFIED
04/04/18 - MARIA ZERRUDO



INVOICE

Page 1 of 1

Wolters Kluwer Legal & Regulatory US
PO Box 71882
Chicago, IL 60694-1882

For Non-Bookstore customers:

Visit our website <http://support.cch.com/myaccount> for
help with your invoice

Billing Support: 1-800-234-1660

Federal ID Number: 13-3504158



4803578320

Invoice Date	02/26/2018
Invoice Number	4803578320
Account Number	4001039859
Ship To Number	4001039859
Terms	Upon Receipt
Order ID	3609998 / US12
PO Number	2543
Ship Method	UPS005

BILL TO:
COLLEGE OF DU PAGE LIBRARY
425 FAWELL BLVD
RM 3038
GLEN ELLYN IL 60137-6708

Qty
1

SHIPTO:UPS Ground - Commercial
COLLEGE OF DU PAGE LIBRARY
425 FAWELL BLVD
RM 3038
GLEN ELLYN IL 60137-6708

Weight: 2 LB

Forwarding Agent:

Comments:

3-7-2018
Voucher # V0499667

Jennifer M. Brubaker
3/21/18

Pick Location	Order Qty	Ship Qty	ISBN/PIN Number	Description	List Price	Discount	Update Charges	Net Price	Tax	Line Total
AACC03E	1	1	9781454873396	FAMILY LAW FOR PARALEGALS 7E Item #10050997-0002	189.95			189.95		189.95
SUBTOTAL									\$	189.95
Total Shipping and Handling									\$	22.41
Tax on Shipping and Handling										
Payment Due									\$	212.36

SEE REVERSE SIDE FOR IMPORTANT INSTRUCTIONS

Detach this portion and return with your payment to assure proper credit to your account.

Remit To

Wolters Kluwer Legal & Regulatory US
P.O. Box 71882
Chicago, IL 60694-1882

BWNCMQF

COLLEGE OF DU PAGE LIBRARY
425 FAWELL BLVD
GLEN ELLYN IL 60137-6708
USA

- ☐ Address Change on Back
☐ Credit Card Info on Back

INVOICE TOTAL	\$	212.36
Account Number	4001039859	
Invoice Number	4803578320	
Invoice Print Date	02/26/2018	
AMOUNT DUE	\$	212.36
Payment Amount		



4803578320

0000000048035783200000212367

INVOICE PAYMENT INFORMATION

Online

To Pay by Credit Card via mail

To pay via credit card over the phone or for other questions

To pay by Check

Cancellation and Return Information

Questions?

Bookstore Customer

For Non-Bookstore customers:

To pay your invoice online with a credit card, update your address information, or to view your current balance, please visit <http://support.cch.com/myaccount>. Please see the slip below. We accept Visa, MC, AMEX, & Discover

800-234-1660

Law Library Customers please dial 877-529-5427

Bookstore Customers please dial 800-317-3113

Wholesaler/Sub Agency Customers please dial 301-360-1508

Submit payment with the bottom portion of this invoice to the remittance address provided

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800-234-1660 or customer.service@wolterskluwer.com

Law Library Customers please dial 877-529-5427

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Detach this portion and return with your payment to assure proper credit to your account.

Account Number: _____

Invoice Number(s)	Amount to be Applied
	\$
	\$
	\$

Address Change: ☐ Billing ☐ Shipping
☐ Both

Charge By:

AMEX ☐ MASTERCARD ☐ VISA ☐ DISCOVER ☐

Authorized Charge Amount: _____

Credit Card Number: _____

Expiration Date: _____/_____/_____

Cardholder Name: _____

Address: _____

City/State/Zip: _____

Cardholder Signature: _____

Mail To: WoltersKluwer Legal & Regulatory US
P.O. Box 71882
Chicago, IL 60694-1882