

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1085560
Vendor Name: Grainger - Downers Grove
Invoice Number: 9787075515
Invoice Date: 05/14/18
PO Number: P0357791
Check Number: E0068241
Check Amount: \$ 4,167.77
Check Date: 07/19/2018
Department ID: 00431
Reviewer Name:
Voucher Number: V0519504
Redaction Type: None
Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: zerrudom@cod.edu
Sent: Mon Jul 16 09:27:41 CDT 2018
To: invoicing@cod.edu
CC:
Subject: FW: Account # 801544016 college of DuPage

From: Winter, Denee <Denee.Winter@grainger.com >
Sent: Monday, July 16, 2018 9:18 AM
To: Zerrudo, Maria <zerrudom@cod.edu>
Subject: Account # 801544016 college of DuPage

Hi Marivic,

Here is the credit you requested, along with the invoices that remains open and past due.

9787075515 May 277.00 - still open

9744403636 April -1159.65 --- credit you requested for your records.

Thank you!
Kind Regards,

Denree Winter | Collections Representative| W.W. Grainger, Inc.
Direct: 608-898-5457 | denree.winter@grainger.com





2701 OGDEN AVE
DOWNERS GROVE, IL 60515-1704
www.grainger.com

PAGE 1 OF 1

INVOICE

GRAINGER ACCOUNT NUMBER 801544016
INVOICE NUMBER 9787075515
INVOICE DATE 05/14/2018
DUE DATE 06/13/2018
AMOUNT DUE \$277.00

SHIP TO

MANAGER PURCHASING
College of DuPage Shipping & Recei
425 Fawell Blvd.
Glen Ellyn IL 60137

PO NUMBER: 357791
CALLER: JEAN ZAAR
CUSTOMER PHONE: 6309422238
ORDER NUMBER: 1320942730
INCO TERMS: FOB ORIGIN

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

3 WAY MATCH

Pay invoices online at:
www.grainger.com/invoicing
Sign up for paperless invoicing at:
www.grainger.com/paperlessinvoicing

THANK YOU! FB NUMBER 36-1150280

FOR QUESTIONS ABOUT THIS INVOICE OR ACCOUNT CALL 1-800-472-4643

PO LINE #	ITEM #	DESCRIPTION	QUANTITY	UNIT PRICE	TOTAL
	49H267	STORAGE TOTE,POLYPROPYLENE,CLEAR,64 QT MANUFACTURER # 3441 GRPRCL.06 Delivery #:6396495027 Date: 05/14/2018 Carrier: UPS GROUND No:of Pkgs:4 Wt: 72.400 Trk #:1ZY6247W0320655946 1ZY6247W0320655955 1ZY6247W0320655964 SHIPPED FROM: DC MINOOKA 005 701 GRAINGER WAY,MINOOKA,IL 60447-9998	20	13.85	277.00

THIS PURCHASE IS GOVERNED EXCLUSIVELY BY GRAINGER'S TERMS OF SALE, INCLUDING: (I) DISPUTE RESOLUTION REMEDIES, AND (II) CERTAIN WARRANTY AND DAMAGES LIMITATIONS AND DISCLAIMERS IN EFFECT AT THE TIME OF THE ORDER, WHICH ARE INCORPORATED BY REFERENCE HEREIN. GRAINGER'S TERMS OF SALE ARE AVAILABLE AT WWW.GRAINGER.COM
PRODUCT RETURN INSTRUCTIONS ARE AVAILABLE AT WWW.GRAINGER.COM/RETURNS

INVOICE SUB TOTAL 277.00

These items are sold for domestic consumption. If exported, purchaser assumes full responsibility for compliance with US export controls. Diversion contrary to US law prohibited.

Reprint

PAY THIS INVOICE; NO STATEMENT WILL BE SENT. PAYMENT TERMS Net 30 days IN U.S. DOLLARS. AMOUNT DUE \$277.00

PLEASE DETACH THIS PORTION AND RETURN WITH YOUR PAYMENT

BILL TO:

COLLEGE OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
UNITED STATES OF AMERICA

REMIT TO:

GRAINGER
DEPT. 801544016
PALATINE, IL 60038-0001

801544016978707551510000277001000000010000000100000018061325

X

ACCOUNT NUMBER

801544016

DATE

05/14/2018

INVOICE NUMBER

9787075515

AMOUNT DUE

\$277.00

FOR COMMENTS OR CHANGE OF ADDRESS, ENTER INFORMATION ON REVERSE SIDE

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1085560
Vendor Name: Grainger - Downers Grove
Invoice Number: 9745313388
Invoice Date: 04/02/18
PO Number: P0359148
Check Number: E0068241
Check Amount: \$ 4,167.77
Check Date: 07/19/2018
Department ID: 00077
Reviewer Name:
Voucher Number: V0521041
Redaction Type: None
Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

Bill To:**College of DuPage**College of DuPage Accounts Payable
425 Fawell Blvd.
Glen Ellyn, IL 60137

Accounts Payable, SRC2049

Phone: 630-942-2228

Fax: 630-858-9078

**Check
Enclosed****PURCHASE ORDER**

359148

Page: 1

Release Method: Hard Copy

Release Date: 07/17/2018

Created Date: 07/17/2018

*** Confirming Purchase Order *****Vendor:**1085560
Grainger - Downers Grove
2701 Ogden Av
Downers Grove, IL 60515

Attn: Bela Gathy

Phone: 817-202-2592

Fax: 630-810-0496

Ship To:College of DuPage Shipping & Receiving
425 Fawell Blvd.
Glen Ellyn, IL 60137

Purchasing Manager

Phone: 630-942-2238

Fax: 630-858-9077

Deliver To: Brian Clement

AP VERIFIED**07/18/18 - MARIA ZERRUDO**

PO Created By: Cernick, Beth

Purchase Order Comments:

Requisition Number(s): 667929

Requisitioner Name(s): Brian Clement

#	Vendor Item	QTY	UOM	Description	Unit Price	Total Price
1	7B506	1	Each	BULK RACK,STARTER,72" H,48" W,36" D,GRAY	\$391.82	\$391.82
Deliver To: Brian Clement						
2	6YE53	1	each	MOBILE SERVICE BENCH,24" L,4 DRAWERS	\$767.83	\$767.83
Deliver To: Brian Clement						
3	4TW44	2	Each	WORKBENCH TOP,BUTCHER BLOCK,60X30 IN.	\$289.37	\$578.74
Deliver To: Brian Clement						
4	7YD98	2	Each	HEAVY DUTY CABINET BENCH,34-1/2 IN.H	\$1,076.19	\$2,152.38
Deliver To: Brian Clement						
					Sub Total: \$	3,890.77
					Total: \$	3,890.77

Account Code Summary

Account Code	Account Description	Amount
01-10-00077-5409002		\$3,890.77

Terms and Conditions:

1. F.O.B. DESTINATION unless otherwise indicated under Purchase Order Comments.
2. College of DuPage will only accept electronic invoices, which can be in any format, including but not limited to PDF, Word, Excel. Invoices must reference the COD Purchase Order Number. Invoices are to be emailed to invoicing@cod.edu. Questions about payment status or other inquiries, please email acctpay@cod.edu or call 630-942-2228.
3. All payments are processed via ACH transfer on a weekly basis. You are strongly encouraged to set up your ACH account upon receipt of this PO to avoid unnecessary payment delays. A letter will be sent to you under separate cover which outlines the set-up instructions, your log-in, and temporary password. Invoices must be received in an electronic format at least three weeks prior to the due date and are to be emailed to invoicing@cod.edu. Paper checks are issued once-a-month. A paper check will be issued to foreign vendors that are not eligible for ACH transfer.

Bill To:**College of DuPage**

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

Accounts Payable, SRC2049
Phone: 630-942-2228
Fax: 630-858-9078

PURCHASE ORDER

359148

Page: 2**Release Method:** Hard Copy**Release Date:** 07/17/2018**Created Date:** 07/17/2018*** Confirming Purchase Order ***

4. All invoices must be provided to the College for services rendered directly to the College. Undisputed invoices will be paid within sixty (60) days of receipt of properly submitted invoices to the Contractor, in accordance with the Local Government Prompt Payment Act.
5. All solicitations must be directed to the Purchasing Department. Any vendor selling directly to any faculty or staff member, without prior authorization from the Purchasing Department will be removed from our vendor list.
6. College of DuPage is exempt from payment of the Retailers' Occupation Tax, the Service Occupation Tax (both state and local), the Use Tax, and the Service Use Tax. The College's Tax Exemption Identification Number is E9997-3391-06.
7. If unable to ship and/or deliver as required, advise the Purchasing Department immediately with full details at 630-942-2217.
8. All packages shall clearly indicate the purchase order number and contain a packing list of all contents with itemized descriptions.
9. All shipments are accepted subject to inspection and approval by College of DuPage.
10. Any company/organization to be awarded a contract for goods and/or services must be in compliance with the fair employment practice act and all rules & regulations thereunder.
11. Suppliers are required to comply with executive orders 11246, 11375, The Rehabilitation Act of 1973, and the Vietnam Readjustment Act of 1974.
12. All contracts for construction work are subject to the provisions of 820 ILCS 130, ch. 48, Par. 39s-1 through 39s-12, providing for payment of the prevailing rate of wages to laborers, workmen & mechanics. Contractor shall submit to the College, monthly certified payroll records for all workers and sub-contractors utilized for the project.



GRAINGER ACCOUNT NUMBER	801544016
INVOICE NUMBER	9745313388
INVOICE DATE	04/02/2018
DUE DATE	05/02/2018
AMOUNT DUE	\$3,890.77

PO NUMBER:	355531
CALLER:	AMY HULL
CUSTOMER PHONE:	6309423806
ORDER NUMBER:	3016125297
INCO TERMS:	FOB ORIGIN

SHIP TO

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

**PO355931 - All lines on the PO has been reconciled.
Are these additional orders?**

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

Pay invoices online at:
www.graininger.com/invoicing
Sign up for paperless invoicing at:
www.graininger.com/paperlessinvoicing

THANK YOU! FBI NUMBER 36-1150280

FOR QUESTIONS ABOUT THIS INVOICE OR ACCOUNT CALL 1-800-477-4643

PO LINE #	ITEM #	DESCRIPTION	QUANTITY	UNIT PRICE	TOTAL
	7B506	BULK RACK,STARTER,72" H,48" W,36" D,GRAY MANUFACTURER # 6940	1	391.82	391.82
	4TV19	SHELF,36" D,48" W,NO DECKING MANUFACTURER # BPB-48-36	3		
	4TV31	DECKING,RIBBED STEEL,PWDR COAT,48"W,36"D MANUFACTURER # BSD-4836	3		
	4TV46	UPRIGHT FRAME,36" D,1-3/4" W,72" H MANUFACTURER # BUF-3672	2		
	6YE53	MOBILE SERVICE BENCH,24" L,4 DRAWERS MANUFACTURER # 2211A-TH-LU-95	1	767.83	767.83
	4TW44	WORKBENCH TOP,BUTCHER BLOCK,60X30 IN. MANUFACTURER # 4TW44	2	289.37	578.74
	7YD98	HEAVY DUTY CABINET BENCH,34-1/2 IN.H MANUFACTURER # 7YD98	2	1,076.19	2,152.38
	4TW49	WORKBENCH,CABINET, TOP WIDTH 60 IN. MANUFACTURER # CB2000T	2		
	4TW53	DRAWER SET,6 DRAWERS MANUFACTURER # CB12004T	2		
	8DR80	WORKBENCH TOP,60X30 IN MANUFACTURER # 5303TATN	2		

INVOICE SUB TOTAL	3.890.77
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PAY THIS INVOICE. NO STATEMENT WILL BE SENT. PAYMENT TERMS Net 30 days IN U.S. DOLLARS.

AMOUNT DUE

\$3,890.77

PLEASE DETACH THIS SECTION AND RETURN WITH YOUR PAYMENT

BILL TO:

COLLEGE OF DUPAGE
425 FAWELL BLVD
GLEN ELLYN IL 60137-6599
UNITED STATES OF AMERICA

REMIT TO:
GRAINGER
DEPT. 801544016
PALATINE IL 60038-0001

80154401697453133881000389077'0000000100CC0001000000'EC50265

X

ACCOUNT NUMBER

DATE _____

INVOICE NUMBER

AMOUNT DUE

801344016

04/02/2018

9745513366

\$3,890.77

FOR COMMENTS OR CHANGE OF ADDRESS, ENTER INFORMATION ON REVERSE SIDE