

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1084317

Vendor Name: Dept of Veterans Affairs

Invoice Number: 080618

Invoice Date: 08/06/18

PO Number:

Check Number: 0237912

Check Amount: \$ 1,082.70

Check Date: 08/15/2018

Department ID: 08703

Reviewer Name:

Voucher Number: V0522843

Redaction Type: Other

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

Document Below

Please do not mail. Call for pickup

Please do not mail. Call for pickup

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: 8/6/2018
Vendor ID: 1084317

Invoice Number	P.O. Number/ Req. Number	Fund	Func.	Dept.	Object	Object Descrip.	Amount
338547423		06	91	08703	4309001	Other Federal Govt Sources	\$ 1,082.70

Grand Total \$ 1,082.70

--- \$1,000 and Greater: Approval of Division Vice President Required ---

AP VERIFIED

Check the appropriate box below and sign

☒ 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.

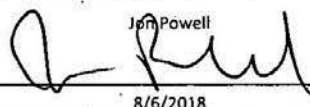
Payee Name: Dept of Veterans Affairs
Debt Management Center Bishop
Henry Whipple Federal BLD PO
Box 11930 ST Paul,
Payee Address: MN 55111-0930

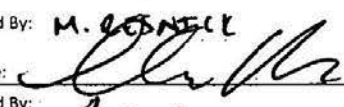

Other Instructions: Give to Jon Powell [Ext. 3946]

Description on Check:

VA Overpayment for 2018SP Chpt 33 (Student Debt)

Approvals:

Prepared By: Jon Powell
Signature: 
Payment Due: 8/6/2018
Board Approved Date:

Reviewed By: M. GOSNELL
Signature: 
Approved By: 
Signature: Brian W. Caputo
Date: 8/6/18
Date: 8/8/18

Approved By Division VP:

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



2023

1084317

2843

08/15/2018

0237912

080618

V0522843

VA overpayt.D.Wagner

0691087034309001

1,082.70

A handwritten signature, possibly reading 'D. Wagner', is written in the center of the page.

1,082.70

0237912

PAY ONLY ONE THOUSAND EIGHTY TWO AND 70/100 DOLLARS

08/15/2018

\$*****1,082.70

Dept of Veterans Affairs
Dept. Management Center
PO Box 11930
Saint Paul MN 55111-0930