

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 0000003

Vendor Name: College of DuPage

Invoice Number: PETTYCASH091918

Invoice Date: 09/19/18

PO Number:

Check Number: 0239913

Check Amount: \$ 232.86

Check Date: 10/02/2018

Department ID: 00829

Reviewer Name:

Voucher Number: V0529136

Redaction Type: None

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

Document Below

College of DuPage - Accounts Payable  
Check Request Form  
revised 3/17/17

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: 9/19/2018  
Vendor ID: 0000003

Invoice Number	P.O. Number/ Req. Number	Fund	Func.	Dept.	Object	Object Descrip.	Amount
		01	10	00345	5401002	Instructional Supplies	\$ 8.34
		01	10	00241	5401002	Instructional Supplies	\$ 4.58
		01	10	00297	5401002	Instructional Supplies	\$ 131.60
		01	10	00226	5401002	Instructional Supplies	\$ 33.99
		05	90	00829	5404001	Audio/Visual Materials	\$ 54.35
Grand Total							\$ 232.86

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: College of DuPage/Petty Cash Fund

Other Instructions: Please send check to The Cashier's Office BIC2424

Payee Address: 425 Fawell Blvd, Glen Ellyn, IL 60137

Description on Check:

description : Petty Cash Reimbursement

Approvals:

Prepared By: Karen F. Pipal

Signature: [Signature]

Payment Due: 9/19/2018

Board Approved Date: \_\_\_\_\_

Reviewed By: M. Vesneck

Signature: [Signature]

Approved By: [Signature]

Signature: [Signature]

Approved By Division VP: \_\_\_\_\_


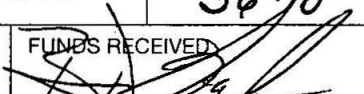
Signature: \_\_\_\_\_

Date: 09/24/18

Date: 9/24/18

Date: \_\_\_\_\_

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

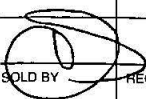
DEPARTMENT <b>WDCB PUBLIC RADIO</b>				DATE <b>9-12-18</b>	
EXPENSE	AGENCY	ORG/SUB	OBJ/SUB	AMOUNT	
<b>PRINZI PLAQUE AWARD</b>	<b>05-90</b>	<b>00829</b>	<b>5404001</b>	<b>36</b>	<b>40</b>
EXPENSE	AGENCY	ORG/SUB	OBJ/SUB		
EXPENSE	AGENCY	ORG/SUB	OBJ/SUB		
EXPENSE	AGENCY	ORG/SUB	OBJ/SUB		
PLEASE ATTACH ALL RECEIPTS.				TOTAL	<b>36 40</b>
EMPLOYEE NAME	AUTHORIZED SIGNATURE		FUNDS RECEIVED		
<b>DRAN OKER</b>					

# VANWAY TROPHY & AWARD

3120 West Main Street  
Rapid City, SD 57702-2336  
(605) 341-2929 Fax (605) 341-3127  
1-888-880-2929

[www.vanwaytrophy.com](http://www.vanwaytrophy.com)

CUSTOMER'S ORDER NO.	PHONE	DATE
Brian		9-6-18
NAME		
O'Keefe, Brian		
ADDRESS		

CASH	C.O.D.	CHARGE	ON ACCT.	MDSE. RET'D.	PAID OUT
1		Plg			36.40
<b>PAID</b> <i>cc VISA</i> 9-6-18					
					36.40
SOLD BY 					TAX
RECEIVED BY					TOTAL 36.40

E PRODUCT 609T

All claims and returned goods MUST be accompanied by this bill.

98012

THANK YOU

VADIAV TRADING CO. CANADA INC.

3120 N. 1600

RAPID CITY, SD 57102

(605) 341-2929

Merchant ID: 0881

Term ID: 0001

Store ID: 0001

Ref ID: 0002

## Phone Order

XXXXXXXXXX9740

VISA

Entry Method: Manual

Total: \$

36.40

09-06-18

11:44:35

Inv #: 000002

Appr Code: 054412

Transaction ID: 468249602758976

Apprvd: Online

Batch#: 000238

AVS Code: ZIP MATCH Z

CVV2 Code: MATCH M

PO #: 98012

Customer Copy

THANK YOU



## Petty Cash Reimbursement Request

This form may be used to request petty cash reimbursements for items in which requests via the employee reimbursement process would not be appropriate. All requests must be in accordance with Petty Cash Reimbursement Administrative Procedure No. 15-56a. Original receipts must be attached and dated within 30 days of purchase.

Department: WDCB PUBLIC RADIO

Date: 9-13-18

Description	GL Number	Amount
COR-25P	05-90-00829-5404001	17.95
		<del>1.48</del> <sup>PPA</sup>
		<sup>PPA</sup>
Total Reimbursement Request:		\$ <del>17.95</del> <sup>19.43</sup>

Employee Name: PAUL ABELLA

Employee Signature: [Signature]

Dept. Authorized Signer Name: DAN BINDERT

Authorized Signature: [Signature]

Date Received: 9-17-18

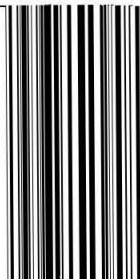
Cashier's Office Use Only

Cashier Name: [Signature]

Request Approved By: [Signature]

Funds Received By: [Signature]

Updated 06.2018



044 3709

Follett's COD Bookstore  
425 Fawell Blvd - SRC Building  
Glen Ellyn  
IL, 60137  
(630) 942-2360  
0764mgr@fhcg.follett.com  
www.efollett.com

ITEM	QTY	PRICE	TOTAL
CDR MEMOREX COLORS 25PK SPIN			
009070191	1@	\$17.95	\$17.95 T

Subtotal \$17.95

Total Sales Tax \$1.48

Total \$19.43

Credit \$19.43

Card:Visa

Account:6129

Auth:031809

Application ID:a0000000980840

Application Name:US DEBIT

TVR:8080088000

IAD:06010a03602000

PAN Seq No.:00

Audit Trace No.:40051039

Verification:Signature

Capture Method:ICC

IL7 8.25 @8.25% \$1.48

Items Purchased: 1

Total Tender \$19.43

Change Due \$0.00



Associate: Mitchell

Thank You For Shopping At  
FOLLETT STORE 0784

Please Save Receipt for Return

4005 0784 828 828 09/14/18 08:18 AM

SALE

\*\*\*\*\*Return Policy\*\*\*\*\*

Valid ID and receipt required for all  
returns, exchanges and refunds.  
Non-textbook items may be returned  
within 30 days of purchase. Textbook  
returns may be accepted if within the  
posted current term deadline. All  
gift card sales are final. Other  
restrictions may apply, see store for  
complete details.

\*\*\*\*\*

\* We want your feedback! \*

\* Go to: \*

\* www.follettexperience.com \*

\* \*

\* Get \$5 off on minimum \$40 purchase \*

\* \*

\* Validation Code:\_\_\_\_\_ \*

\* Offer expires 30 days from \*



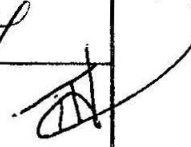
\* purchase date. Exceptions apply, \*

\* see stores for complete details \*

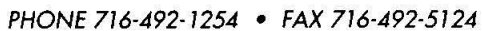
\*\*\*\*\*

# Petty Cash

(See Instructions on Reverse Side)

DEPARTMENT <b>Music</b>				DATE <b>8/31/2018</b>	
EXPENSE	AGENCY	ORG/SUB	OBJ/SUB	AMOUNT	
<b>Instrument Part</b>	<b>01-10</b>	<b>00345</b>	<b>5401002</b>	<b>8</b>	<b>34</b>
EXPENSE	AGENCY	ORG/SUB	OBJ/SUB		
EXPENSE	AGENCY	ORG/SUB	OBJ/SUB		
EXPENSE	AGENCY	ORG/SUB	OBJ/SUB		
PLEASE ATTACH ALL RECEIPTS.				TOTAL	<b>8.34</b>
EMPLOYEE NAME	AUTHORIZED SIGNATURE		FUNDS RECEIVED		
<b>Sharon Jones</b>			 		





**PAGE:**

1

ORDER NUMBER: 0158587  
SHIPPED: 08/28/18  
CUSTOMER NUMBER: JONE605

S  
H  
I  
P  
T  
O

SHARON JONES  
1167 GREENSFIELD DR  
NAPERVILLE IL 60563

\*A MAXIMUM FINANCE CHARGE OF 1.5% (ANNUAL PERCENTAGE RATE OF 18%) will be charged on balances unpaid 30 days from the invoice due date.

College of DuPage

# Petty Cash

(See Instructions on Reverse Side)

DEPARTMENT <b>MATH &amp; NATURAL SCIENCES</b>				DATE <b>9/4/2018</b>	
EXPENSE	AGENCY	ORG/SUB	OBJ/SUB	AMOUNT	
<b>Physics Lab</b>	<b>01-10</b>	<b>00241</b>	<b>5401002</b>	<b>4</b>	<b>58</b>
EXPENSE	AGENCY	ORG/SUB	OBJ/SUB		
EXPENSE	AGENCY	ORG/SUB	OBJ/SUB		
EXPENSE	AGENCY	ORG/SUB	OBJ/SUB		
PLEASE ATTACH ALL RECEIPTS.				TOTAL	<b>4 58</b>
EMPLOYEE NAME <b>Bob Carrington</b>		AUTHORIZED SIGNATURE <i>Thomas O. Schneider</i>		FUNDS RECEIVED <i>[Signature]</i>	

FORM 1852 (2/98)

*P.O.  
KRCand*

*88*

Use Your  2%  
BIG CARD REBATE

**MENARDS®**

**MENARDS - NAPERVILLE**  
**715 FORT HILL DRIVE**  
**NAPERVILLE, IL 60540**

KEEP YOUR RECEIPT  
RETURN POLICY VARIES BY PRODUCT TYPE

Unless noted below allowable returns for  
items on this receipt will be in the form  
of an in store credit voucher if the  
return is done after 11/30/18

If you have questions regarding the  
charges on your receipt, please  
email us at:

NAPEfrontend@menards.com



Sale Transaction

EYEBOLT/NUTS 1/4-20X2 -S  
2029454 2 @2.29

4.58

TOTAL	4.58
TAX NAPERVILLE-IL 7.75%	0.35
TOTAL SALE	4.93
CASH	20.00
CHANGE	15.07-

TOTAL NUMBER OF ITEMS = 2

THE FOLLOWING REBATE RECEIPTS WERE  
PRINTED FOR THIS TRANSACTION:  
4478

YOU, YOUR CASHIER, Shanya

57867 07 4373 / 09/01/18 01:46PM 3505

# College of DuPage

## Petty Cash Reimbursement Request

This form may be used to request petty cash reimbursements for items in which requests via the employee reimbursement process would not be appropriate. All requests must be in accordance with Petty Cash Reimbursement Administrative Procedure No. 15-56a. Original receipts must be attached and dated within 30 days of purchase.

Department: Nursing

Date: 9-17-18

Description	GL Number	Amount
Scale for simulation	01-10-00 226-540/002	33.99
Total Reimbursement Request:		\$ 33.99

Employee Name: Melissa Ericson

Employee Signature: Melissa Ericson

Dept. Authorized Signer Name: Melissa Ericson  
Dr. Debra Gurney

Authorized Signature: Melissa Ericson  
Dr. Debra Gurney

Cashier's Office Use Only

Date Received: 9/18/18

Cashier Name: A. Butler

Request Approved By: J. Schuch

Funds Received By: Melissa Ericson

Updated 06.2018

**Final Details for Order #113-9438197-7269803**

Print this page for your records.

**Order Placed:** September 11, 2018

**Amazon.com order number:** 113-9438197-7269803

**Order Total: \$33.99**

**Shipped on September 12, 2018**

**Items Ordered****Price**

1 of: *Smart Weigh Comfort Baby Scale with 3 Weighing Modes, 44 Pound (lbs) Capacity, Accurate Digital Scale for Infants, Toddlers, and Babies* \$33.99

Sold by: BetterBasics ([seller profile](#)) | Product question? [Ask Seller](#)

Condition: New

**Shipping Address:**

MELISSA ERICSON  
1031 S Ahrens Ave  
Lombard, IL 60148-4003  
United States

Item(s) Subtotal: \$33.99

Shipping & Handling: \$0.00

-----

Total before tax: \$33.99

Sales Tax: \$0.00

-----

**Total for This Shipment: \$33.99**

-----

**Shipping Speed:**

Two-Day Shipping

**Payment information****Payment Method:**

Amazon.com Store Card | Last digits: 3219

Item(s) Subtotal: \$33.99

Shipping & Handling: \$0.00

-----

Total before tax: \$33.99

Estimated tax to be collected: \$0.00

-----

**Grand Total: \$33.99**

**Billing address**

MELISSA ERICSON  
1031 S AHRENS AVE  
LOMBARD, IL 60148  
United States

**Credit Card transactions**

AmazonPLCC ending in 3219: September 12, 2018: \$33.99

To view the status of your order, return to [Order Summary](#).

[Conditions of Use](#) | [Privacy Notice](#) © 1996-2018, Amazon.com, Inc. or its affiliates



# Petty Cash

(See Instructions on Reverse Side)

DEPARTMENT <u>ART</u>				DATE <u>09-06-18</u>	
EXPENSE <u>PAINTBRUSHES - 15</u>	AGENCY <u>01-10</u>	ORG/SUB <u>00297</u>	OBJ/SUB <u>5401002</u>	AMOUNT <u>26.85</u>	
EXPENSE	AGENCY	ORG/SUB	OBJ/SUB		
EXPENSE	AGENCY	ORG/SUB	OBJ/SUB		
EXPENSE	AGENCY	ORG/SUB	OBJ/SUB		
PLEASE ATTACH ALL RECEIPTS.				TOTAL	<u>26.85</u>
EMPLOYEE NAME <u>Frank M. Jackowiak</u>	AUTHORIZED SIGNATURE <u>Chuck Boone</u>		FUNDS RECEIVED <u>Frank Jackowiak</u>		

GL 01-10-00297-5401002

FORM 1652 (2/98)

THANK YOU FOR SHOPPING AT  
LEN'S ACE HARDWARE #10686  
(630) 469-4800

We're Serious About Service!!  
www.LensAceHardware.com

08/15/18 3:01PM KT 308 SALE

-----  
12992 15 EA \$1.79 EA  
PAINTBRSH CHIP1.5WT BRSL \$26.85  
Regular Price: 1.99  
Return Value : 1.79  
Buy 4 or More, Save 10%

SUB-TOTAL:\$ ~~26.85~~ TAX: \$ 2.15  
TOTAL: \$ 29.00  
BC AMT: \$ 29.00

BK CARD#: XXXXXXXXXXXX9024  
MID: 372056474888  
AUTH: 015240 AMT: \$ 29.00  
Host reference #:716370 Bat#

Authorizing Network: VISA

Chip Read  
CARD TYPE:VISA EXPR: XXXX  
AID : A0000000031010  
TVR : 8080008000  
IAD : 06010A03608000  
TSI : 6800  
ARC : 00  
MODE : Issuer  
CVM :  
Name : VISA CREDIT  
ATC :0110  
AC : C02EDFF264785F47  
TxnID/ValCode: 961050

Bank card USD\$ 29.00



==>> JRNL#H16370/3  
CUST NO:\*7

THANK YOU FRANK JACKOWIAK  
FOR YOUR PATRONAGE

I agree to pay above total amount  
according to card issuer agreement  
(merchant agreement if credit voucher)  
Acct: CASH CUSTOMER GLEN ELLYN

Customer Copy

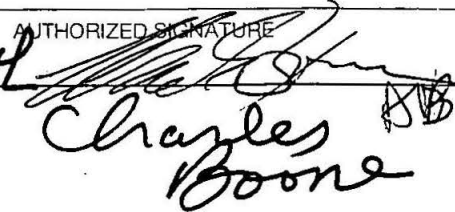
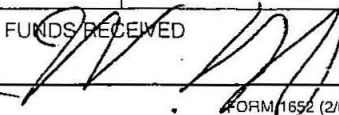
YOU SAVED \$ 3.00 BY SHOPPING AT  
LEN'S ACE HARDWARE #10686

10 00297 5401002

 College of DuPage

# Petty Cash

(See Instructions on Reverse Side)

DEPARTMENT <b>AC H</b>				DATE <b>8/20/18</b>	
EXPENSE <b>Studio Art-Intro</b>	AGENCY <b>10</b>	ORG/SUB <b>00297</b>	OBJ/SUB <b>5401002</b>	AMOUNT <b>13 39</b>	
EXPENSE	AGENCY	ORG/SUB	OBJ/SUB		
EXPENSE	AGENCY	ORG/SUB	OBJ/SUB		
EXPENSE	AGENCY	ORG/SUB	OBJ/SUB		
PLEASE ATTACH ALL RECEIPTS.				TOTAL	<b>13 39</b>
EMPLOYEE NAME <b>Demetrius</b>	AUTHORIZED SIGNATURE  <b>Charles Boone</b>			FUNDS RECEIVED 	

FORM 1652 (2/07)

✓  
  
Received  
9/12/18  
K.P.



# Michael's

Where Creativity Happens

MICHAELS STORE #1278 (630) 812-1305

MICHAELS STORE #1278

1516 BUTTERFIELD RD, STE A

DOWNERS GROVE, IL 60515-1066

Rewards Number: LMR90027560789

8-9985-4515-4995-7602-5111-4117-1359-9105



1965 SALE 1092 1278 003 8/20/18 11:03  
STRATH 300 NEWSPR 12017390180 13.99 1 @ 8.39  
CPN GET ITM 40%OFF 5.60-  
AL PAINT WATERCLR 400100660454 5.00 1 @ 5.00

AMOUNT QUALIFIED FOR DISCOUNT \$ 13.99  
YOU SAVED \$ 5.60

Coupon(s) Applied:

400100656938 CPN GET ITM 40%OFF

SUBTOTAL 13.39

Sales Tax 8% 1.07

TOTAL 14.46

ACCOUNT NUMBER \*\*\*\*\*6809

Debit 14.46

APPROVAL: 020312 CHIP ONLINE

PIN Verified

Application Label: US DEBIT

AID: A0000000980840

TVR: 8080048000

TSI: 6800

DEVICE ID:0003

TRACE REF:000805950

This receipt expires at 180 days on 02/21/19

Click. Buy. Create. Shop michaels.com today!

Get Savings & Inspiration! Text\* SIGNUP to 273283

To Sign Up for Email & Text Messages.

\*Msg & Data Rates May Apply

You will receive 1 autodialed message  
with a link to join Michaels alerts.

Aaron Brothers

Custom Framing

New! Now in Over 1,200 Michaels Stores & Online

THANK YOU FOR SHOPPING AT MICHAELS

Dear Valued Customer:

Michaels return and coupon policies are available  
at michaels.com and in store at registers.

Please see a store associate for more information.


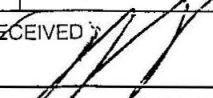
\*\*\*\*\*

10 00297 5401002

 College of DuPage

# Petty Cash

(See Instructions on Reverse Side)

DEPARTMENT <b>ACT</b>				DATE <b>8/23/18</b>	
EXPENSE <b>STUD 10</b>	AGENCY <b>10</b>	ORG/SUB <b>00297</b>	OBJ/SUB <b>5401002</b>	AMOUNT <b>17 80</b>	
EXPENSE	AGENCY	ORG/SUB	OBJ/SUB		
EXPENSE	AGENCY	ORG/SUB	OBJ/SUB		
EXPENSE	AGENCY	ORG/SUB	OBJ/SUB		
PLEASE ATTACH ALL RECEIPTS.				TOTAL	<b>17 80</b>
EMPLOYEE NAME <b>Jenn Ser Heret</b>	AUTHORIZED SIGNATURE 			FUNDS RECEIVED 	

Charles Boone  
AS

FORM 1652 (2/07)

\*\*\*\*\*  
Blick Art Materials

79 Danada Square East

630-653-0569

\*\*\*\*\*  
Purchase Order: jennifer hereth  
\*\*\*\*\*

QTY	LIST	EVERYDAY	DISC OFF LIST	EXT. PRICE
=====				
229231001	CHINA HARKER UHT			
208	\$28.00	\$28.00	\$-10.20	\$17.80N

Reason: State or Local Government

Exempt Id: \*E9997-3391-

Special pricing

Final Sub Total	\$17.80
SALES TAX @ 8.0000	\$0.00

Total \$17.80

--- EMV Auth Information ---

US DEBIT	USD	\$17.80
*****6809	Purchase	
AID: A0000000980840	Mode: Issuer	
TUR: 8000048000	TSI: 6800	
IAD: 06010A03602000	ARC: 00	
Chip Read	Approved 045112	

Verified by PIN

--- EMV Auth Information ---

\*\*\*\* Tax Exempt \*\*\*\*

\*E9997-3391-

COLLEGE OF DUPAGE,

425 FAVELL BLVD.

GLEN ELLYN

IL 60137-6599

Customer:

Sign X.....

Sales Associate: 5453

Trx 4537 Str2273 Reg001 8/22/18 11:46



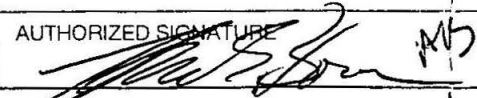
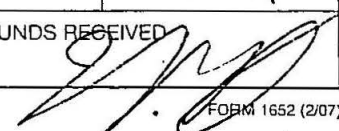
\*ENPNABGSDJL\*

10 00297 5401002

 College of DuPage

# Petty Cash

(See Instructions on Reverse Side)

DEPARTMENT <b>AcH</b>				DATE <b>8/14/18</b>	
EXPENSE <b>Intro to Studio Art</b>	AGENCY <b>10</b>	ORG/SUB <b>00297</b>	OBJ/SUB <b>5401002</b>	AMOUNT <b>31 37</b>	
EXPENSE	AGENCY	ORG/SUB	OBJ/SUB		
EXPENSE	AGENCY	ORG/SUB	OBJ/SUB		
EXPENSE	AGENCY	ORG/SUB	OBJ/SUB		
PLEASE ATTACH ALL RECEIPTS.				TOTAL	<b>31 37</b>
EMPLOYEE NAME <b>Jenn Serf Hereth</b>	AUTHORIZED SIGNATURE  <b>Charles Boone</b>			FUNDS RECEIVED 	

FORM 1652 (2/07)

\*\*\*\*\*  
**Blick Art Materials**

79 Danada Square East

630-653-0569

\*\*\*\*\*  
 Purchase Order: jennifer hereth  
 =====

QTY	LIST	EVERYDAY	DISC OFF LIST	EXT. PRICE
=====				
241431260	DB ARTIST TAPE .5 X60YD WHITE			
1@	\$6.49	\$6.49	\$-0.97C	\$5.52T
14407250	MTN 94 SPRAY BREEZE GRN 400ML			
1@	\$6.50	\$6.50	\$-0.98C	\$5.52T
14405490	MTN 94 SPRY BARCLNTA BLU 400ML			
1@	\$6.50	\$6.50	\$-0.98C	\$5.52T
215183057	PINK PEARL ERASER HED EACH			
10@	\$5.30	\$5.30	\$-0.80C	\$4.50T
341401070	IKT TDYE 1.88INX10YD DUCK TAPE			
1@	\$7.39	\$7.39	\$-5.42	\$1.97T
755081062	MINI FLDNG LINT ALLR IMPULSE			
1@	\$5.99	\$5.99	\$-4.02	\$1.97T
608801002	HERMAID FUN CCKTL NPKN PS PRY			
1@	\$6.99	\$6.99	\$-4.02	\$2.97T
252071013	DRAGON FREEHAND TEMPLATE			
1@	\$26.14	\$25.89	\$-24.44C	\$1.70T
Original Price:		\$25.89		

Reason: In-Store promo

252071017	KANJI SYMBOLS FREEHAND TEMPLATE			
1@	\$26.14	\$25.89	\$-24.44C	\$1.70T
Original Price:		\$25.89		

Reason: In-Store promo

Final Sub Total	\$31.37
SALES TAX @ 8.0000	\$2.51

Total	\$33.88
-------	---------

--- EMV Auth Information ---

US DEBIT	USD	\$33.88
*****6809	Purchase	
AID:A0000000980840	Mode: Issuer	
TUR:8000048000	TSI: 6800	
IAD:06010A03602000	ARC: 00	
Chip Read	Approved 064411	

Verified by PIN

--- EMV Auth Information ---

Sales Associate: 5453

Trx 3973 Str2273Reg001 8/16/18 10:42

\*\*\*\*\* OUR RETURN POLICY \*\*\*\*\*

Returns gladly accepted with original receipt within 30 days in saleable condition and in original packaging. some restrictions apply, check store for details. Web Match rebates are proportionally deducted from any refund.

Complete our survey at [www.dickblick.com/storesurvey](http://www.dickblick.com/storesurvey)  
 for a chance to win a \$100 Blick Gift Card. Ends 10/1/18 US, 18+  
 Reference Code: 22730013973180816

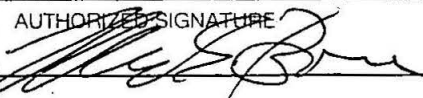



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# Petty Cash

(See Instructions on Reverse Side)

DEPARTMENT <b>ACH</b>				DATE <b>8/16/18</b>	
EXPENSE <b>Intro to Studio Art</b>	AGENCY <b>10</b>	ORG/SUB <b>00297</b>	OBJ/SUB <b>5401002</b>	AMOUNT <b>4219</b>	
EXPENSE	AGENCY	ORG/SUB	OBJ/SUB		
EXPENSE	AGENCY	ORG/SUB	OBJ/SUB		
EXPENSE	AGENCY	ORG/SUB	OBJ/SUB		
PLEASE ATTACH ALL RECEIPTS.				TOTAL <b>4219</b>	
EMPLOYEE NAME <b>Jennifer Hewitt</b>	AUTHORIZED SIGNATURE 			FUNDS RECEIVED 	

FORM 1652 (2017)

*paid 8/29/18*

\*\*\*\*\*  
Blick Art Materials

79 Danada Square East

630-653-0569

\*\*\*\*\*  
Purchase Order: jennifer hereth  
\*\*\*\*\*

QTY	LIST	EVERYDAY	DISC OFF LIST	EXT. PRICE
=====				
207771010	WHITE MED GELLY ROLL			
10	\$1.49	\$1.49	\$-0.30	\$1.19T
Special pricing				
229231001	CHINA MARKER WHT			
183	\$25.20	\$25.20	\$-9.18	\$16.02T
Special pricing				
229234000	CHINA MARKER YLU			
10	\$1.40	\$1.40	\$-0.51	\$0.89T
Special pricing				
229234000	CHINA MARKER YLU			
10	\$1.40	\$1.40	\$-0.51	\$0.89T
Special pricing				
241431260	DB ARTIST TAPE .5 X60YD WHITE			
10	\$6.49	\$6.49	\$-0.97C	\$5.52T
101731023	9INX12IN 30/SHT XL UC PAPER			
10	\$11.05	\$8.84	\$-2.21	\$8.84T
101731023	9INX12IN 30/SHT XL UC PAPER			
10	\$11.05	\$8.84	\$-11.05	\$0.00T
101731023	9INX12IN 30/SHT XL UC PAPER			
10	\$11.05	\$8.84	\$-2.21	\$8.84T
101731023	9INX12IN 30/SHT XL UC PAPER			
10	\$11.05	\$8.84	\$-11.05	\$0.00T

Final Sub Total \$42.19  
SALES TAX @ 8.0000 \$3.38

Total \$45.57

--- EMV Auth Information ---

US DEBIT USD \$45.57  
\*\*\*\*\*6809 Purchase  
AID:A0000000980840 Mode: Issuer  
TVR:8000048000 TSI: 6800  
IAD:06010A03602000 ARC: 00  
Chip Read Approved 044211

Verified by PIN

--- EMV Auth Information ---

Sales Associate: 5453

Trx 3972 Str2273Reg001 8/16/18 10:37

\*\*\*\*\* OUR RETURN POLICY \*\*\*\*\*

Returns gladly accepted with original receipt within 30 days in saleable condition and in original packaging. some restrictions apply, check store for details. Web Match rebates are proportionally deducted from any refund.

Complete our survey at [www.dickblick.com/storesurvey](http://www.dickblick.com/storesurvey)  
for a chance to win a \$100 Blick Gift Card. Ends 10/1/18 US, 18+  
Reference Code: 22730013972180616



0°C

26.85 +

13.39 +

17.80 +

31.37 +

42.19 +

005

131.60 \*



0000003

10/02/2018

0239913

PETTYCASH0	V0529136	To Reimburse Petty Cash	0110003455401002	8.34
PETTYCASH0	V0529136	To Reimburse Petty Cash	0110002415401002	4.58
PETTYCASH0	V0529136	To Reimburse Petty Cash	0110002975401002	131.60
PETTYCASH0	V0529136	To Reimburse Petty Cash	0110002265401002	33.99
PETTYCASH0	V0529136	To Reimburse Petty Cash	0590008295404001	54.35

232.86

0239913

PAY ONLY TWO HUNDRED THIRTY TWO AND 86/100 DOLLARS

10/02/2018

\$\*\*\*\*\*232.86

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Petty Cash Fund  
425 Fawell Blvd  
Glen Ellyn IL 60137

