

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1512676

Vendor Name: Sue Franzen

Invoice Number: 90E3501525

Invoice Date: 09/24/18

PO Number: P0360255

Check Number: 0241608

Check Amount: \$ 829.19

Check Date: 10/17/2018

Department ID: 00446

Reviewer Name:

Voucher Number: V0529255

Redaction Type: None

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

Document Below

Proforma Premiums

Telephone...: (630) 844-3147

Email.....: sue.franzen@proforma.com

Remit-to

Proforma

P.O. Box 640814

Cincinnati, OH 45264-0814

Business address

College of DuPage

Attn: David Swope

425 Fawell Blvd.

Glen Ellyn, IL 60137

Invoice

Invoice #: 90E3501525

Document date: 9/24/2018

Page: 1 of 1

Sales order: S0E35001674

Customer PO#.....: 360255

Your ref.: COD Black Padfolios/Nar

Entered by: SUF

Payment Terms: Net 30

Invoice account....: C0E3500193

Customer account: C0E3500193

Salesperson: Sue Franzen

3 WAY MATCH

Delivery address

College of Dupage

Shipping & Rec #360255

425 Fawell Blvd.

Glen Ellyn, IL 60137

Item	Description	Quantity	Unit	Unit price	Amount
0551-01	Windsor Impressions Writing Pad Debossed	48	EA	9.2500	444.0000
Setup	debossing repeat set-up charge	1	EA	25.0000	25.0000
Freight non-taxable	Freight non-taxable	1	EA	59.8000	59.8000

Subtotal
469.00

Freight subtotal
59.80

Tax Amount
0.00

Invoice Amount
\$528.80 USD

Original Invoice REMITTANCE ADVICE

Please detach this portion and return with your payment

PAY THIS AMOUNT

Invoice account	Invoice number	Invoice date	Balance Due	
C0E3500193	90E3501525	9/24/2018	\$528.80	USD

Invoice-to

College of Dupage

425 Fawell Blvd.

Glen Ellyn, IL 60137

Remit-to

Proforma

P.O. Box 640814

Cincinnati, OH 45264-0814

From: sue.franzen@proforma.com
Sent: Mon Sep 24 12:09:15 CDT 2018
To: invoicing@cod.edu
CC: nieton108@cod.edu
Subject: Your PO#360255 Invoice

Attached please find the invoice for your PO#360255.
Padfolios were ordered for Nancy Nieto.

Thank you.

Sue Franzen
Proforma Premiums
Franchise Owner

520 Kingsway Drive
Aurora, IL 60506
630.844.3147

<https://proformapremiums.espwebsite.com/>



Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1512676

Vendor Name: Sue Franzen

Invoice Number: 90E3501537

Invoice Date: 10/04/18

PO Number: P0360349

Check Number: 0241608

Check Amount: \$ 829.19

Check Date: 10/17/2018

Department ID: 00446

Reviewer Name:

Voucher Number: V0530052

Redaction Type: None

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

Document Below

From: sue.franzen@proforma.com
Sent: Thu Oct 04 16:11:38 CDT 2018
To: invoicing@cod.edu
CC: nieton108@cod.edu
Subject: FW: Invoice 90E3501537 has been posted

Attached please find an invoice for lanyards ordered for Nancy.
PO #360349

Please let me know if you have questions.
Thank you.

Oct. 5th and 8th out of office

Sue Franzen
Proforma Premiums
Franchise Owner

520 Kingsway Drive
Aurora, IL 60506
630.844.3147

<https://proformapremiums.espwebsite.com/>



PROforma

Proforma Premiums

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Email.....: sue.franzen@proforma.com

Remit-to

Proforma

P.O. Box 640814

Cincinnati, OH 45264-0814

Business address

College of DuPage

Attn: David Swope

425 Fawell Blvd.

Glen Ellyn, IL 60137

Invoice

Invoice #: 90E3501537

Document date: 10/4/2018

Page: 1 of 1

Sales order: S0E35001681

Customer PO#.....: 360349

Your ref.: Lanyards - Nancy/David S

Entered by: SUF

Payment Terms: Net 30

Invoice account....: C0E3500193

Customer account: C0E3500193

Salesperson.....: Sue Franzen

Delivery address

College of Dupage

Shipping & Rec #360349

425 Fawell Blvd.

Glen Ellyn, IL 60137

3 WAY MATCH

Item	Description	Quantity	Unit	Unit price	Amount
SSFLT-34-SEW	3/4 Silkscreen Flat Lanyard with Sew on Breakaway and Bulldog Clip Athletic Gold Black Imprint	100	EA	1.8000	180.0000
Setup	set-up charge	1	EA	35.0000	35.0000
badgeh555	Blank Mylar Pouch 4 x 3 1/4" insert card style 555	100	EA	0.6400	64.0000
Freight non-taxable	Freight non-taxable	1	EA	21.3900	21.3900

<u>Subtotal</u>	<u>Freight subtotal</u>	<u>Tax Amount</u>	<u>Invoice Amount</u>
279.00	21.39	0.00	\$300.39 USD

Original Invoice REMITTANCE ADVICE

Please detach this portion and return with your payment

PAY THIS AMOUNT

Invoice account	Invoice number	Invoice date	Balance Due	
C0E3500193	90E3501537	10/4/2018	\$300.39	USD

Invoice-to

College of Dupage

425 Fawell Blvd.

Glen Ellyn, IL 60137

Remit-to

Proforma

P.O. Box 640814

Cincinnati, OH 45264-0814