

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1531655

Vendor Name: Commission on Accreditation of

Invoice Number: 080118

Invoice Date: 08/01/18

PO Number: P0360828

Check Number: 0244467

Check Amount: \$ 575.00

Check Date: 11/14/2018

Department ID: 00429

Reviewer Name:

Voucher Number: V0535252

Redaction Type: None

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

Document Below



# ICA

## International Council of Accreditation

REC'D

10/10/18

C.O.D.

2025 Woodlane Drive  
St. Paul, MN 55125-2998

Phone: (651) 731-7243

Fax: (651) 731-0410

[ica@icaccreditation.org](mailto:ica@icaccreditation.org)

[www.icaccreditation.org](http://www.icaccreditation.org)

August 1, 2018

PO#: 360828

College of DuPage

Eye Care Assistant Program

Mitzi Thomas, COMT

425 Farwell Blvd

Glen Ellyn, IL 60141

**AP VERIFIED**

**10/19/18 - MARIA ZERRUDO**

Description

Amount Due

2019 Annual Fee

\$ 575.00

One Program

Total Due:

\$ 575.00

Date Due:

December 31, 2018

**Note:**

Annual Reports are also due on October 31<sup>st</sup> of each year. For those programs who submitted a Self-Study last year, or if your program is in the current Self-Study process, you do not have to send in an annual report. The CoA-OMP fee schedule can be found at <http://icaccreditation.org/accreditation/fees.html>.

**Only US currency accepted. Make checks payable to CoA-OMP**

Remit payment to:

CoA-OMP

2025 Woodlane Drive

St. Paul, MN 55125

*Marianne Hunnicutt* 10/15/18  
Marianne Hunnicutt

GL# 01-20-00429-5406602