

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1453308
Vendor Name: Alliance Paper and Food Servic
Invoice Number: 1070402-00
Invoice Date: 03/05/20
PO Number: B0366936
Check Number: 0266564
Check Amount: \$ 371.44
Check Date: 04/14/2020
Department ID: 11301
Reviewer Name:
Voucher Number: V0607772
Redaction Type: None
Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: schoettlek@cod.edu
Sent: Thu Mar 12 11:49:39 CDT 2020
To: schoettlek@cod.edu, invoicing@cod.edu
CC:
Subject: Scanned from a Xerox Multifunction Device

Please open the attached document. It was scanned and sent to you using a Xerox Multifunction Device.
Attachment File Type: pdf, Multi-Page Multifunction Printer Location: AR201WC7835 Device Name:
PRN303

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11058 West Addison Street
Franklin Park, IL 60131
(847) 349-1500
www.allpfs.com

Emergency Phone Number:
(INFOTRAC) 800-535-5053

INVOICE

Remit To: 11058 W. Addison St.
Franklin Park, IL 60131

E-MAILED MAR 12 2020

Customer #	Invoice Date	Invoice #
21803	03/05/20	1070402-00
Tax ID	PO #	Page #
E99973391	TOM	1 of 1
Entered By	Instructions	
Mariana Martinez	AFTER 12PM	

** Due to Tariffs Prices may be Subject to Change **

Bill To: COD LIBERAL ARTS
425 FAWELL BLVD
MAC 201
GLEN ELLYN, IL 60137

Contact #: (630)942-2056

Ship To: COD LIBERAL ARTS
425 FAWELL BLVD
MAC 201
630-854-6707
GLEN ELLYN, IL 60137

Bo 316936
line 2 (2000)
= \$371.44

Terms		Ship Point		Ship Via		Shipped		
NET 30		Alliance Paper and Foodservice		OUR TRUCK		03/05/20		
Line #	Product And Description	Quantity Ordered	Quantity B/O	Quantity Shipped	Qty U/M	Unit Price	Ext. Price	T x
1	FKGC16S CUP Clr Greenware 16-18z PLA 20/50ct	2	0	2	CS	121.15	242.30	N
2	FKGC9OF CUP Clr Greenware 9oz PLA Old Fashion 1M	1	0	1	CS	99.58	99.58	N
3	CW-HB8 BAG Poly Sandwich .75mil Clr 6.5x8 on RL/tie 2M	1	0	1	CS	29.56	29.56	N

3 Lines Total

Total Weight: 96.40

Total Cubic Volume: 10.23

Total Units

4

Total

371.44

Amount Due

371.44

AP VERIFIED
03/12/20 - MARIA ZERRUDO

05-60-11301-5408001
67 Food/Gun DONE

Elena M. Gowan
3/9/20

Signature: _____

Date Received: _____

A LATE PAYMENT FEE OF 1.5% PER MONTH WILL BE APPLIED TO ALL INVOICES NOT PAID WITHIN THE TERMS OF SALE. NO RETURNS, REFUNDS, STORE CREDIT OR EXCHANGES ON SPECIAL ORDER, RED TAG OR CLOSEOUT ITEMS. CREDIT ON RETURNED MERCHANDISE WILL ONLY BE GIVEN IF ACCOMPANIED BY THE INVOICE ON WHICH THE ITEM WAS PURCHASED & BY A RETURN AUTHORIZATION FORM. NO ITEM ACCEPTED AFTER 30 DAYS FROM INVOICE PURCHASE DATE. A 20% RESTOCKING FEE & FREIGHT WILL APPLY ON ALL RETURNED MERCHANDISE.

Customer Copy

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