

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1601418

Vendor Name: JPMorgan Chase & Co

Invoice Number: PC21432

Invoice Date: 09/29/20

PO Number:

Check Number: PC21432

Check Amount: \$ 15,592.52

Check Date: 09/29/2020

Department ID: 00757

Reviewer Name:

Voucher Number: V0645556

Redaction Type: Other

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

Document Below

From: cruseb199@cod.edu
Sent: Tue Sep 29 12:12:03 CDT 2020
To: invoicing@cod.edu
CC:
Subject: FW: Pcard Check Requests-August Statement

From: Hall, Shameica <halls115@cod.edu>
Sent: Tuesday, September 29, 2020 10:44 AM
To: Cruse, Bethany <cruseb199@cod.edu>
Subject: FW: Pcard Check Requests-August Statement

Good morning Bethany,

Please process this check request as a dummy check. This is the Chase Pcard EFT Payment.

Best regards,

Shameica Hall
Accountant II - Financial Affairs
College of DuPage
425 Fawell Blvd | SRC 2130 | Glen Ellyn, IL 60137-6599 | USA
Phone 630.942.2678 | Fax 630.942.2297 | halls115@cod.edu

From: Virgilio, David <virgiliod@cod.edu>
Sent: Tuesday, September 29, 2020 10:39 AM
To: Hall, Shameica <halls115@cod.edu>
Subject: RE: Pcard Check Requests-August Statement

Here you go!

David P. Virgilio, C.P.A.
Interim Controller / Assistant Financial Controller – Financial Affairs
College of DuPage – Glen Ellyn, IL
phone 630.942.3028 – fax 630.942.2297

Check out the Financial Affairs Team Site [Here](#)

From: Hall, Shameica <halls115@cod.edu>
Sent: Tuesday, September 29, 2020 10:31 AM
To: Virgilio, David <virgiliod@cod.edu>
Subject: Pcard Check Requests-August Statement

Good morning Dave,

Please see the attached Pcard check request. Please review/approve at your convenience.

Thank you,

Shameica Hall
Accountant II - Financial Affairs
College of DuPage
425 Fawell Blvd | SRC 2130 | Glen Ellyn, IL 60137-6599 | USA

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: 9/29/2020
Vendor ID: 1601418

Invoice Number	P.O. Number/ Req. Number	Fund	Func.	Dept.	Object	Object Descrip.	Amount
		01	80	00757	5909061	Pcard/Travel Card Clearing	\$ 15,592.52
Grand Total							\$ 15,592.52

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

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.

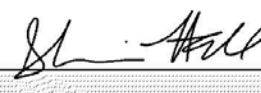
Payee Name: J. P. Morgan Chase Bank NA
Payee Address: P.O. Box 4475
Carol Stream, IL 60197-4475


Other Instructions: Already paid electronically by automatic EFT, Debited on 09/15/2020
Please pay with dummy check

Description on Check:

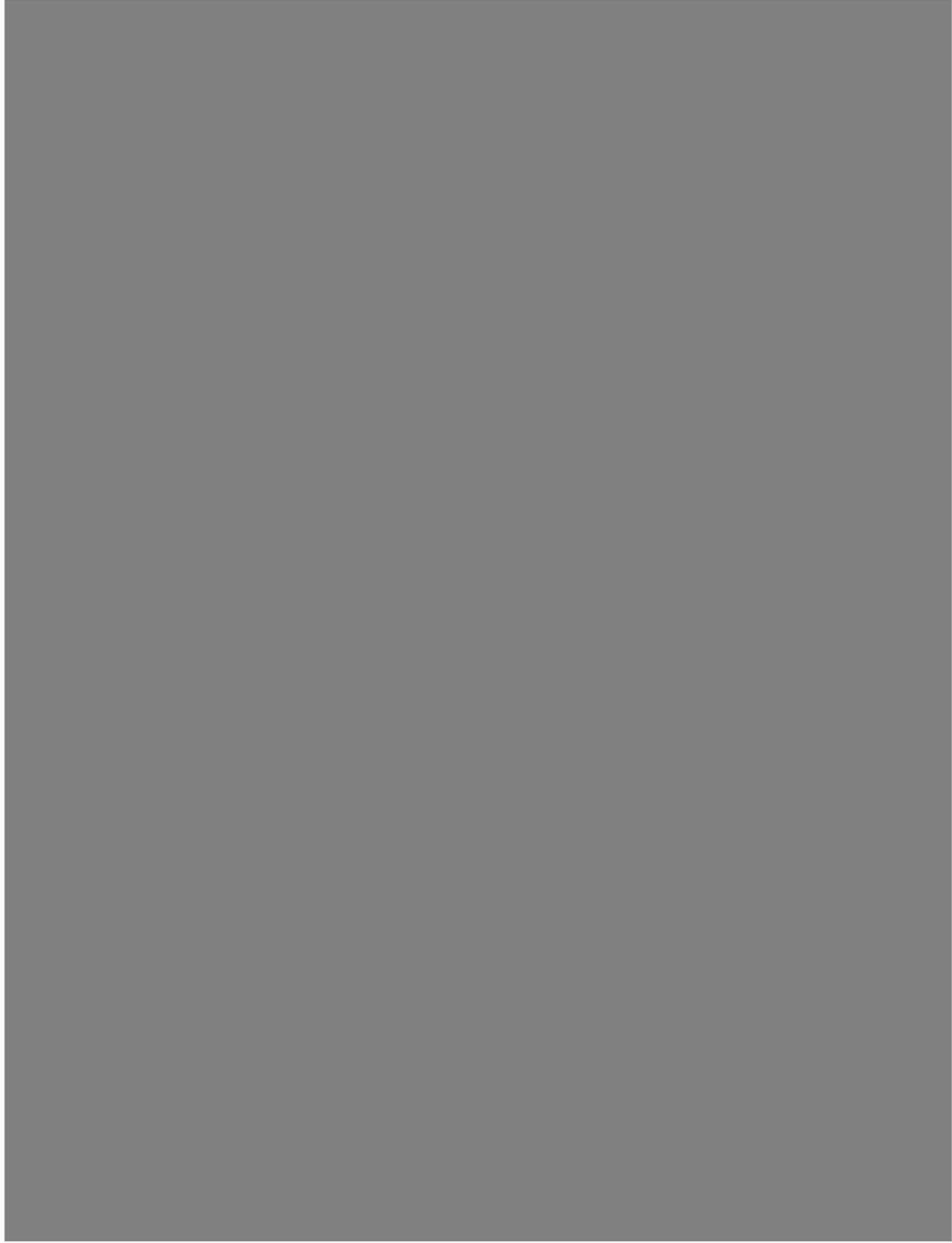
August 2020 Chase PCard Statement Payment-EFT Debited on 09/15/2020.

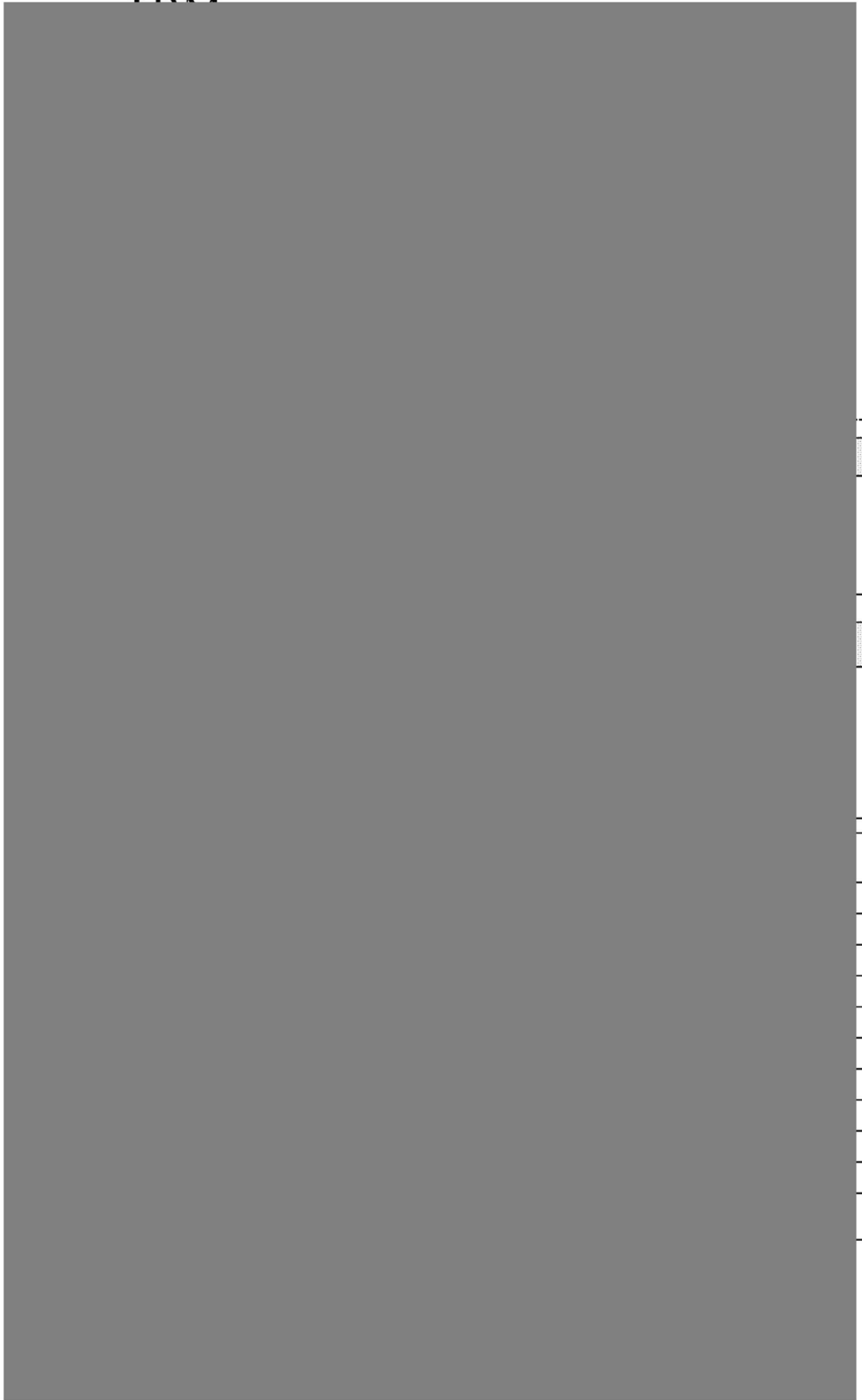
Approvals:

Prepared By: Shameica Hall
Signature: 
Payment Due:
Board Approved Date:

Approved By: David Virgilio Date: 9/29/2020
Signature: 
Approved By: Date:
Signature:
Approved By Division VP: Date:
Signature: n/a for P Card / T Card transactions

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





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