

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1369448
Vendor Name: ALOA Security Professionals As
Invoice Number: 183620
Invoice Date: 09/24/20
PO Number: PO373057
Check Number: 0278982
Check Amount: \$ 255.00
Check Date: 04/13/2021
Department ID: 00709
Reviewer Name: Kathy Striplin
Voucher Number: V0670902
Redaction Type: None
Document Type: AP Invoice

Document Below

From: Heid, Dirk <heidd@cod.edu>
Sent: Tue Mar 30 16:12:02 CDT 2021
To: invoicing@cod.edu
CC: schuerm@cod.edu,striplin@cod.edu
Subject: FW: Attached Image

Invoicing

Please process this invoice for PO # 373057

Thank you

Dirk

From: Heid, Dirk <heidd@cod.edu>

Sent: Tuesday, March 30, 2021 4:08 PM

To: Heid, Dirk <heidd@cod.edu>

Subject: Attached Image

[attachment: 0040_001.pdf]



AIL Membership Dues Invoice

3500 Easy St.
Dallas, TX 75247
214-819-9733
www.aloa.org

Please note address changes/corrections on form

Invoice No 183620 2020-09-24
Member ID 10333
Work Tel 630-942-2088
Cell Phone
Email schuerm@cod.edu
Logo Reg No AR12698

Joseph K. Schuerman OML
College Of DuPage
425 Fawell Blvd
Glen Ellyn, IL 60137-2143

APPROVED
04/01/21 - DIRK HEID

Item	Description	Price	Quantity	Amount
IL	AIL	255.00	1	255.00
Total				255.00
Paid				0.00
Balance				255.00
IAIL Dues				
Donation to the ALOA Scholarship Fund __ \$100 __ \$50 __ \$20 __ \$ Other				
__ I want to go Green! US/Territories \$230.00 - Int \$200.00				
Total Amount Enclosed				255.00

Please go to <https://www.aloamembers.org> and log in to pay your dues online. <https://www.aloamembers.org> is a members only area. Use your email address and ID number to login. You can change your information, pay your dues and register for a meeting. Plus, there is a lot of other valuable information on this site.

Or use the information below to submit your payment:

Email - membership@aloea.org
Fax - 214-666-4303
Mail to: ALOA
PO Box 972143
Dallas, TX 75397-2143

All dues are payable in US funds.

You can now pay your dues online at <https://www.aloamembers.org>

Check No. _____ MasterCard _____ American Express _____ Visa _____ Discover _____

Account Number (_____ - _____ - _____) Exp Date _____ CVS/CVV _____

Cardholder's Signature _____

INVOICE REVIEWED
OKAY TO PAY
KATHY STRIPLIN 03/31/21