

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1630611
Vendor Name: Edwin R Fredericksen Scholarsh
Invoice Number: 051421
Invoice Date: 05/14/21
PO Number:
Check Number: 0281634
Check Amount: \$ 2,104.28
Check Date: 06/08/2021
Department ID: 98269
Reviewer Name:
Voucher Number: V0684105
Redaction Type: Other
Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: Marek, Robert <marekr@cod.edu>
Sent: Wed Jun 02 15:40:11 CDT 2021
To: invoicing@cod.edu
CC: vosicky@cod.edu,christopherd@cod.edu
Subject: Scholarship Check Request (3 of 4)

Good afternoon,

Please see the attached check request for **Edwin R Fredericksen Scholarship Fund** in the amount of \$2,104.28. Please also note the special instructions.

Thanks!

Bobby Marek

Senior Accountant | Financial Affairs

College of DuPage

425 Fawell Blvd | SRC 2130 | Glen Ellyn, IL 60137-6599

phone 630-942-2655 | fax 630-942-2297 | marekr@cod.edu

[attachment: Fifth3rd Kraus 5.14.2021_DC_Redacted.pdf]

College of DuPage - Accounts Payable
Check Request Form
revised 1/29/2021

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 - Non-Purchase Order Procedure No. 10-65

Date: 5/14/2021
Vendor ID: 1630611

Invoice Number	Fund	Func.	Dept.	Object	Object Descrp.	Amount
051421	10	99	98269	2900024	Agency Scholarships	\$ 2,104.28

Grand Total \$ 2,104.28

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

AP VERIFIED

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.

06/03/21 - MARIA ZERRUDO

☐ 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: Edwin R Fredricksen Scholarship Fund
38 Fountain Square Plaza
MD 1090VD
Payee Address: Cincinnati, OH 450202

Other Instructions: **PLEASE SEND LETTER ON NEXT PAGE WITH CHECK**

Description on Check:

Returning unused scholarship funds for Andrew Kraus; student did not return.

Approvals:

Prepared By: Diana Christopher
Signature: Diana Christopher
Payment Due:
Board Approved Date:

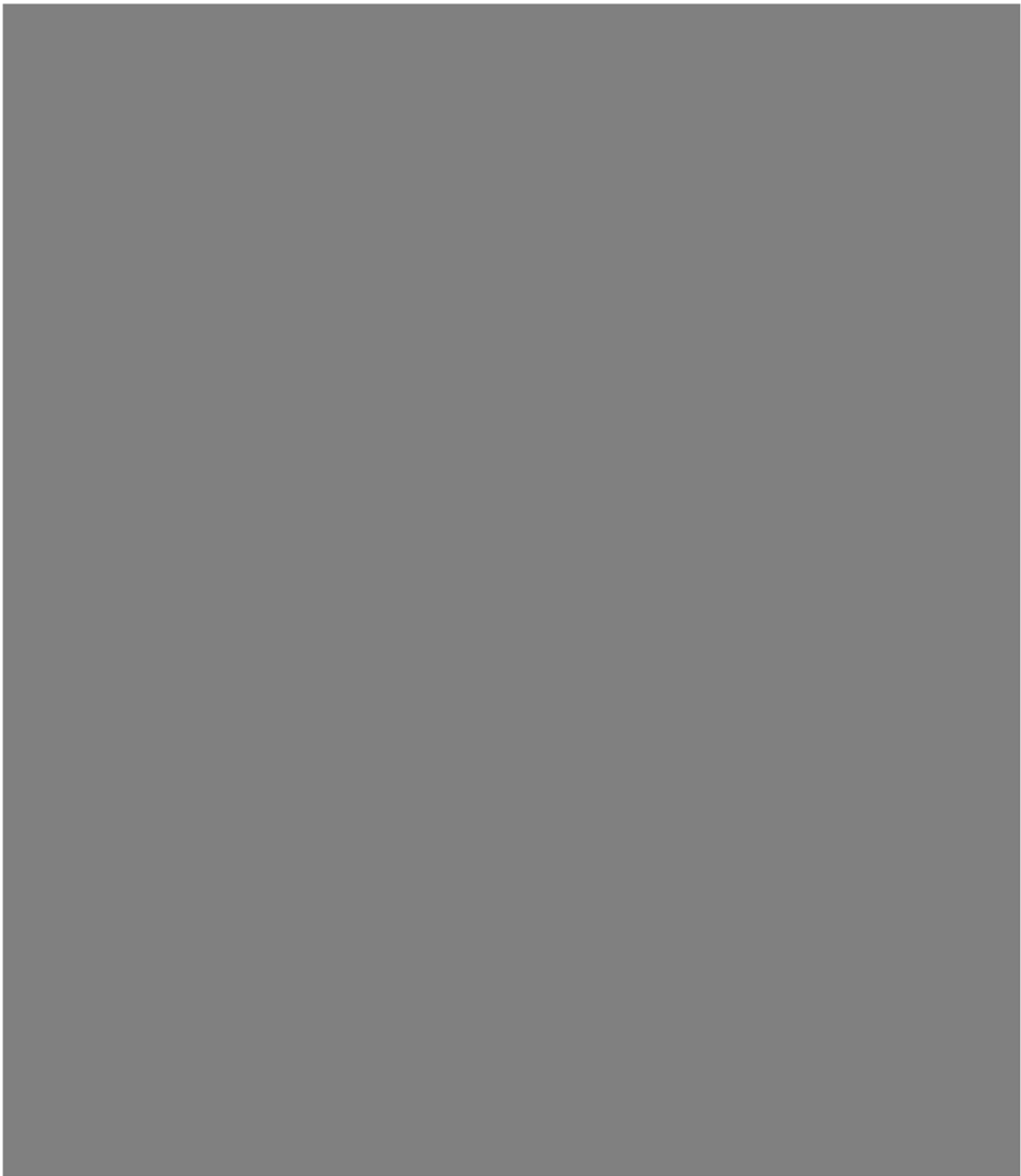
Approved By: Diana Del Rosario
Signature: Diana Del Rosario
Approved By: Dr. Diana Del Rosario
Signature: Mark Curtis-Chavez
Approved By Division VP: Dr. Mark Curtis-Chavez
Signature:

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









AUG 02 2018

College of DuPage
Office of Student Financial Assistance

FIFTH THIRD BANK
222 S RIVERSIDE PLZ, MD GRV3H
CHICAGO, IL 60606-5808



COLLEGE OF DUPAGE
OFFICE OF STUDENT FINANCIAL ASST
425 FAWELL BLVD.
DLEN ELLYN, IL 60137

Received Via Fax/Mail

AUG 02 2018

College of DuPage
Office of Student Financial Assistance

