

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1086165

Vendor Name: ICISP

Invoice Number: 5/1/21

Invoice Date: 06/15/21

PO Number:

Check Number: 0282297

Check Amount: \$ 750.00

Check Date: 06/22/2021

Department ID: 00389

Reviewer Name:

Voucher Number: V0687001

Redaction Type: None

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

Document Below

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: 6/15/2021  
Vendor ID: 1086165

Invoice Number	Fund	Func.	Dept.	Object	Object Descrip.	Amount
May 1, 2021	01	10	00389	5406002	Dues	\$ 750.00

Grand Total \$ 750.00

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.

06/16/21 - BETHANY CRUSE



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: ICISP, c/o Karen Huber

Other Instructions:

Payee Address: 1500 W Raab Rd, Normal IL 61761

Description on Check:

AY 21-22 membership dues.

Approvals:

Prepared By: Sue Kerby

Approved By: Maren McKellin Date:

Signature: Susan Kerby

Signature: Maren McKellin 6/15/21

Payment Due: asap

Approved By: Date:

Board Approved Date:

Signature:

Approved By Division VP: Date:

Signature:

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

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From: Accounts Payable <acctpay@cod.edu>  
Sent: Tue Jun 15 13:22:10 CDT 2021  
To: invoicing@cod.edu  
CC:  
Subject: FW: ICISP Dues Payment  
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**From:** McKellin, Maren K. <mckellin@cod.edu>  
**Sent:** Tuesday, June 15, 2021 12:16 PM  
**To:** Accounts Payable <acctpay@cod.edu>  
**Cc:** Kerby, Susan <kerbys@cod.edu>  
**Subject:** ICISP Dues Payment

Please see the attached for payment.

Thank you,  
Maren

**Maren McKellin, M.A.**

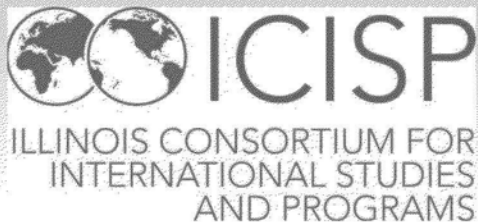
Manager, Field and Experiential Learning/Study Abroad/Global Education  
College of DuPage  
425 Fawell Blvd. | Glen Ellyn, IL 60137  
phone: (630) 942-3762  
web: [cod.edu/field](http://cod.edu/field)

Maximizer | Arranger | Adaptability | Empathy | Positivity



**Save a tree.** Please consider the environment before printing this email.

[attachment: ICISP Invoice fy22.pdf]



# INVOICE

DATE: MAY 1, 2021

ICISP, c/o Karen Huber  
Heartland Community College  
1500 West Raab Road  
Normal, IL 61761-9446

Phone: (309)-268-8664 Fax (309)-268-7981  
E-mail: karen.huber@heartland.edu

TO College of DuPage  
Attention: Sue Kerby  
425 Fawell Boulevard  
Glen Ellyn, IL 60137-6599

## DUE DATE

July 1, 2021

QTY	DESCRIPTION	UNIT PRICE	LINE TOTAL
	ICISP Dues FY22	\$750	\$750
	OK to pay 6/15/21 <i>Maren Mc Kellin</i>		
SUBTOTAL			\$750
CREDIT			
TOTAL DUE			\$750

Make all checks payable to ICISP-Heartland Community College  
THANK YOU FOR YOUR BUSINESS!