

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1557471

Vendor Name: Association for Student Conduct Admin

Invoice Number: 9600, 9661

Invoice Date: 6/13/2022

PO Number:

Check Number: E0090031

Check Amount: \$ 222.00

Check Date: 06/15/2022

Voucher Number: V0741357

Document Type: AP Invoice

Document Below

Check Request Form

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 Administrative Procedure 10-65, Vendor Payment — Non-Purchase Order.

Date: 06/07/2022 Vendor ID: 1557471 Vendor Name: Association for Student Conduct Administration

Payee Address: P.O. Box 735190, Dallas TX 75373 Payment Due Date: June 7, 2022

Invoice Number	GL Account number(s) e.g. 01-80-00757-5401001	GL Account Name e.g. Office Supplies	Amount
9600	01-30-00466-5406002	Dean of Students: Dues	111.00
9661	01-30-00466-5406002	Dean of Students: Dues	111.00
Total			\$ 222.00

Check the appropriate box below:

- ☒ 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.

Description on Check:

For annual membership of Student Conduct Association Dues.

Other Instructions:

All requests will require the following approvals:

Requester: Adeline Cooke Digitally signed by Adeline Cooke
Date: 2022.06.09 15:13:20 -05'00' Print Name: Adeline Cooke

Budget Officer: Nathania Montes Digitally signed by Nathania Montes
Date: 2022.06.09 15:25:12 -05'00' Print Name: _____

Requests \$5,000 and over will require the additional approvals below:

Next Level Supervisor (if applicable): _____ Print Name: _____

Next Level Supervisor (if applicable): _____ Print Name: _____

Next Level Supervisor (if applicable): _____ Print Name: _____

Area Administrator (only required if request is \$5,000 and over): _____ Print Name: _____

Area Cabinet Officer (only required if request is \$10,000 and over): _____ Print Name: _____

Board Approval Date (only required if request is \$25,000 and over): _____

Return approved request and all supporting documentation to Accounts Payable (SRC 2132A), invoicing@cod.edu

Check Request Form (*cont.*)

Processing a Check Request:

To expedite the processing of a check request, or other non-purchase order disbursement, the requesting department should:

1. Verify that the vendor intake process has been completed by the Procurement Office.
Payment cannot be made to a vendor until this process has been completed.
2. Complete and review this check request form and confirm that all relevant supporting documentation is attached including fully executed contracts, if applicable.
3. Ensure the payee information is complete and includes the vendor's Colleague ID number.
4. Ensure that the general ledger account number is included and correct.
5. Maintain a copy of the approved check request form for department records.
6. Submit the completed check request form to the Accounts Payable Office.

The check request form will be returned to the budget officer if the information is incomplete, not in compliance with College Policy, or if budget is not available.

"Cooke, Addie" <cookea19@cod.edu>

Check Request form

"Cooke, Addie" <cookea19@cod.edu>

Thu, Jun 9, 2022 at 08:30 PM GMT

CC:

BCC:

Hello,

Please find a check request form and two invoices attached.

Thank you,

Addie Cooke

Coordinator

Office of the Dean of Student Affairs

College of DuPage

Phone: 630-942-2485

3 attachments

NM invoice for ASCA 9661.pdf

ASCA Assia 2022-2023.pdf

Check Request FormASCA.pdf

INVOICE

Invoice ID: 0500-1244-1812

Vendor	Association for Student Conduct Admin
Created By	Adeline Cooke [1511092 cookea19]
Create Date	06/09/2022

Invoice Information

Vendor	Association for Student Conduct Admin [1557471]
Address	[2c15ced4-ad55-4531-bebf-07d1788be391] P.o. Box 735190 Dallas, TX 75373-5190
Invoice Number	9600
Invoice Date	05/25/2023
Invoice Amount	111.00 USD

Invoice Notes

A Cooke 06/09/2022 03:32 PM
Email address of sender: cookea19@cod.edu.
Email received timestamp: 06/09/2022 20:32 GMT

Expense Summary

Amount (USD)

Name: **Assia Baker**
 Contact ID: 11690
 Member Type: Professional - Individual Membership
 Membership Expiration Date: 05/25/2023



INVOICE

Tuesday, May 24, 2022
 Invoice No: 9000
 Member ID: 6939
 Contact ID: 11690

Bill To:

College of DuPage
 Attn: Assia Baker
 425 Farwell Blvd
 Glen Ellyn, IL 60137

Remit Payment To:
 ASSOCIATION FOR STUDENT CONDUCT
 P.O. Box 735190
 Dallas, TX 75373-5190

Please include Invoice # on all payments

DESCRIPTION	UNIT PRICE	QTY	AMOUNT
Membership Renewal	\$111.00	1	\$111.00
Member Type: Professional - Individual Membership Through 5/25/2023, Member Renew Date: 5/24/2022			
TERMS: Due Upon Receipt			
			Subtotal \$111.00
			Sales Tax \$0.00
			Prior Payments \$0.00
			TOTAL DUE \$111.00

Notes:
 Member Type: Professional - Individual Membership
 Membership Expiration Date: 5/25/2023
 Membership Cost: \$111.00
 Notes: Public Renewal

Make checks payable to: Association for Student Conduct Administration
 Thank you for being part of our association!

"Cooke, Addie" <cookea19@cod.edu>

Check Request form

"Cooke, Addie" <cookea19@cod.edu>

Thu, Jun 9, 2022 at 08:30 PM GMT

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Coordinator

Office of the Dean of Student Affairs

College of DuPage

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ASCA Assia 2022-2023.pdf

Check Request FormASCA.pdf

INVOICE

Invoice ID: 0500-1244-1811

Vendor	Association for Student Conduct Admin
Requester	Nathania Montes [0051945 montes]
Created By	Adeline Cooke [1511092 cookea19]
Create Date	06/09/2022

Invoice Information

Vendor	Association for Student Conduct Admin [1557471]
Address	[2c15ced4-ad55-4531-bebf-07d1788be391] P.o. Box 735190 Dallas, TX 75373-5190
Invoice Number	9661
Invoice Date	06/09/2022
Invoice Amount	111.00 USD

Invoice Notes

A Cooke 06/09/2022 03:32 PM
Email address of sender: cookea19@cod.edu.
Email received timestamp: 06/09/2022 20:32 GMT

Expense Summary

Amount (USD)

6/9/22, 2:50 PM

https://www.theasca.org/af_invoice_view.asp?invoiceid=9661



INVOICE

Thursday, June 9, 2022
 Invoice No: 9661
 Member ID: 8677
 Contact ID: 11319

Bill To:

College of DuPage
 Attn: Nathania Montys
 425 Fawell Blvd
 Glen Ellyn, IL 60137

Remit Payment To:
 ASSOCIATION FOR STUDENT CONDUCT
 P.O. Box 735190
 Dallas, TX 75373-5190

Please include Invoice # on all payments

DESCRIPTION	UNIT PRICE	QTY	AMOUNT
Membership Renewal	\$111.00	1	\$111.00
Member Type: Professional - Individual Membership Through 6/9/2023, Member Renew Date: 6/9/2022			
TERMS: Due Upon Receipt			
			Subtotal \$111.00
			Sales Tax \$0.00
			Prior Payments \$0.00
			TOTAL DUE \$111.00

Notes:

Organization Name: College of DuPage
 Primary Member Name: Nathania Montys
 Organization ID: 8677
 Member Type: Professional - Individual Membership
 Membership Expiration Date: 6/9/2023
 Membership Cost: \$111

Transaction Date: 6/9/2022 3:46:33 PM

Notes: Admin Renewal

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Thank you for being part of our association!

"Cooke, Addie" <cookea19@cod.edu>

Check Request form

"Cooke, Addie" <cookea19@cod.edu>

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Office of the Dean of Student Affairs

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