

Information:

Drawer: Accounts Payable - Invoices  
Vendor Number: 1084317  
Vendor Name: Dept of Veterans Affairs  
Invoice Number: 343924056-090722  
Invoice Date: 9/7/2022  
PO Number:  
Check Number: 0302313  
Check Amount: \$ 765.00  
Check Date: 09/13/2022  
Voucher Number: V0752095  
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: 9/7/2022 Vendor ID: 1084317 Vendor Name: Dept. of Veterans Affairs

Payee Address: Debt Management Center Bishop Henry Whipple Federal BLD PO Box 11930 St. Paul, MN 55111-0930 Payment Due Date: 9/7/2022

Invoice Number	GL Account number(s) e.g. 01-80-00757-5401001	GL Account Name e.g. Office Supplies	Amount
343924056	06-91-08703-4309001	Other Federal Govt Sources	765.00
<b>Total</b>			<b>\$ 765.00</b>

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.

Other Instructions:

Place in overhead compartment at Paul Annarella's desk.

**All requests will require the following approvals:**

Requester: Paul Annarella Digitally signed by Paul Annarella  
Date: 2022.09.07 09:37:00 -05'00' Print Name: Paul Annarella

Budget Officer: David Virgilio Digitally signed by David P Virgilio  
Date: 2022.09.07 10:16:49 -05'00' Print Name: David Virgilio

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): \_\_\_\_\_

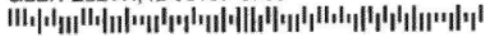
**Return approved request and all supporting documentation to Accounts Payable (SRC 2132A), [invoicing@cod.edu](mailto:invoicing@cod.edu)**



**DEPARTMENT OF VETERANS AFFAIRS**  
**Debt Management Center**  
Bishop Henry Whipple Federal Building  
P.O. Box 11930  
St. Paul, MN 55111-0930

2055870\_215\*\*\*\*\*SNGLP  
COLLEGE OF DUPAGE  
425 FAWELL BLVD SRC 2015  
GLEN ELLYN, IL 60137-6708

T1 P0



Your check or money order should be made payable to the U.S. Department of Veterans Affairs and mailed to the above address together with the bottom portion of this letter. Be sure to include the student's name and file number on your remittance to ensure proper credit.

**IF YOU HAVE QUESTIONS**

If you have questions regarding payment of the debt, you should contact the VA Debt Management Center at 1-833-720-2574. If calling from outside of the U.S., please dial 1-612-843-6508. Our office hours are 6:30 a.m. to 6:00 p.m. Central Time. Please note that we experience our highest call volumes on Mondays and throughout the first week of each month. By avoiding these peak times, you will minimize your wait time. Your call may be monitored for quality assurance. You can also contact us via Ask VA at <https://ask.va.gov/>. In Ask VA, please select "Veterans Affairs - Debt" as the category and "A School Official" as the topic to ensure proper routing. If you have questions regarding specific students or payments, please submit a separate inquiry for each.

Respectfully,

Debt Management Center  
U.S. Department of Veterans Affairs

FOR PROPER CREDIT TO YOUR ACCOUNT, PLEASE DETACH AND RETURN WITH YOUR PAYMENT



Department of Veterans Affairs

2022207

**PAYMENT REMITTANCE**

81327 343924056 0075 23062005181327 0082600 5

ENCLOSED

ENTER YOUR CURRENT ADDRESS BELOW ONLY IF THE ONE ABOVE IS INCORRECT,  
PLEASE INCLUDE YOUR ZIP CODE.

PHONE NO.  
(Area Code)

check or money order.

## Annarella, Paul

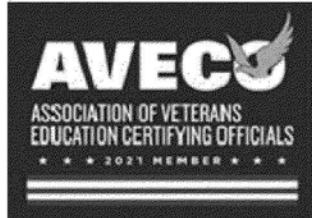
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**From:** Bruhnke, Kristen  
**Sent:** Tuesday, August 30, 2022 11:25 AM  
**To:** Annarella, Paul  
**Subject:** William Termine 1385513  
**Attachments:** William Termine 07-12-22.pdf; William Termine 07-22-22.pdf; William Termine 07-26-22.pdf

Thanks!

**Kristen Bruhnke**  
**Veterans Services Program Coordinator**  
**College of DuPage**

425 Fawell Blvd. | SSC 2225J | Glen Ellyn, IL 60137-6599 | USA  
phone 630.942.3852 | fax 630.942.4991 | [bruhnkek@cod.edu](mailto:bruhnkek@cod.edu)



Need to speak to a Veterans Services team member? We offer in person and virtual appointments! Please [click here](#) to schedule.

"Annarella, Paul" <annarellap@cod.edu>

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**Ch.33 Debt Check Requests 9.7.2022**

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"Annarella, Paul" <annarellap@cod.edu>

Wed, Sep 7, 2022 at 03:20 PM GMT

CC: Resnick, Michelle <resnickm@cod.edu>

BCC:

Good morning,

Attached please find 2 check requests. **Once the checks are cut, please give them to Paul Annarella.**  
Please do not mail the checks.

Please let me know if you have any questions.

Thank you.

**Paul Annarella**

Accounts Receivable Specialist

College of DuPage

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

Phone 630.942.4472 | Fax 630.942.2297

