

**Information:**

**Drawer:** Accounts Payable - Invoices

**Vendor Number:** 1512676

**Vendor Name:** Sue Franzen

**Check Details:**

**Check Number:** E0106410

**Check Amount:** \$ 9,814.85

**Check Date:** 3/18/2025

**Invoice Details:**

**Invoice Number:** BE35002605A

**Invoice Date:** 3/3/2025

**PO Number:** P0015748

**Voucher Number:** V0875971

**Document Type:** AP Invoice

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**Document Below**



## Original Bill

Bill Number BE35002605A  
Bill Date 3/3/2025  
**Due Date 5/1/2025**  
Terms Net 60  
Sales Order SE35002605  
Sales Person Sue Franzen

### Proforma Premiums

Telephone: 630-844-3147  
Email: [sue.franzen@proforma.com](mailto:sue.franzen@proforma.com)

### Sold To

Jennifer Butler  
College of DuPage  
Rec PO#  
425 Fawell Blvd.  
Glen Ellyn, IL 60137  
Phone: 630-942-3802  
[butlerj61@cod.edu](mailto:butlerj61@cod.edu)

### Shipped To

College of DuPage  
Autumn Jacobs  
Rec PO#P0015748  
425 Fawell Blvd.  
Glen Ellyn, IL 60137

**Customer PO: P0015748**

**Customer Reference: Triangle Phone Stand**

Item #	Item Description	QTY Billed	QTY Ordered	Back Order	Unit Price	Per	Credit	Amount
Phone Stand	Triangle Phone Stand 250 white - black imprint 250 red - black imprint 300 black - white imprint  Artwork needed in black Two location imprint for this item Front location imprint area: 1.5"w x 0.5"h Top location imprint area: 1.5"w x 0.25"h	800	800	0	1.8000	Each	-	\$1,440.00
ink change	ink change charge White and black imprint colors	1	1	0	20.0000	Each	-	\$20.00
set-up charge	set-up charge one per location	2	2	0	60.0000	Each	-	\$120.00
Line-Item Total	Freight Amount	Tax Amount	Sub Total	Deposits	Credits/Discounts	<b>Amount Due:</b>		
\$1,580.00	\$78.00	-	\$1,658.00	-	-	<b>\$1,658.00 USD</b>		

Bills that are paid beyond terms will be adjusted to reflect current retail prices in addition to a 1.5% per month (18% per annum) service charge. Vendor makes no warranties, express or implied, on merchantability, fitness or otherwise which extend beyond the description of the product herein. Furthermore, buyer agrees through payment of this bill that Vendor's damages, if any, shall be limited to the total selling price of any item purchased.

Please indicate on your remittance the bill numbers to which the payment is to be applied.

**Thank you for your business!**

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*Please detach this portion and return with your payment.*

### Remittance Advice

Billed Customer #	Bill Number	Bill Date	Amount Due
C0E3500193	BE35002605A	3/3/2025	\$1,658.00 USD

### BILL TO:

College of DuPage  
Accounts Payable  
425 Fawell Blvd.  
Glen Ellyn, IL 60137

### PLEASE SEND PAYMENT TO:

Proforma  
P.O. Box 640814  
Cincinnati, OH 45264-0814

Sue Franzen <sue.franzen@proforma.com>

---

[External] Purchase Order P0015748 - Bill #BE35002605A from Proforma Premiums

---

Sue Franzen <sue.franzen@proforma.com>

Mon, Mar 3, 2025 at 10:27 PM UTC

CC:

BCC:

**CAUTION:** This email originated from outside of COD's system. Do not click links, open attachments, or respond with sensitive information unless you recognize the sender and know the content is safe.

Attached are the following bill(s):

BE35002605A | 1658.00 USD | 03/03/2025 | PO #: P0015748

Please let me know if you have any questions or need additional information.

Thank you very much for your business!

**Sue Franzen**

Owner

(630) 844-3147

Proforma Premiums

<http://www.proforma.com/premiums>

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**1 attachment**

Customer\_Bill\_BE35002605A.pdf

**Information:**

**Drawer:** Accounts Payable - Invoices

**Vendor Number:** 1512676

**Vendor Name:** Sue Franzen

**Check Details:**

**Check Number:** E0106410

**Check Amount:** \$ 9,814.85

**Check Date:** 3/18/2025

**Invoice Details:**

**Invoice Number:** BE35002610A

**Invoice Date:** 3/4/2025

**PO Number:** P0015801

**Voucher Number:** V0876099

**Document Type:** AP Invoice

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**Document Below**



## Original Bill

Bill Number BE35002610A

Bill Date 3/4/2025

Due Date 5/2/2025

Terms Net 60

Sales Order SE35002610

Sales Person Sue Franzen

### Proforma Premiums

Telephone: 630-844-3147

Email: [sue.franzen@proforma.com](mailto:sue.franzen@proforma.com)

### Sold To

Jessica Lang

College of DuPage

Rec PO#

425 Fawell Blvd.

Glen Ellyn, IL 60137

Phone: 630-942-2447

[langj@cod.edu](mailto:langj@cod.edu)

### Shipped To

College of DuPage

Rec #P0015801

425 Fawell Blvd.

Glen Ellyn, IL 60137

**Customer PO: P0015801****Customer Reference: New Items**

Item #	Item Description	QTY Billed	QTY Ordered	Back Order	Unit Price	Per	Credit	Amount
Lip Balm	Round Scented Lip Balm Green Melon Flavor Black imprint	125	125	0	1.0500	Each	-	\$131.25
setup	set-up charge	1	1	0	30.0000	Each	-	\$30.00
Satin Pen	Satin Pen with antimicrobial additive Lime green pen white imprint	250	250	0	0.7000	Each	-	\$175.00
repeat set-up	set-up charge	1	1	0	25.0000	Each	-	\$25.00
Hot/cold packs	2x2 Gel Beads Hot/cold Packs Green Square Black imprint Physical Therapist Assistant Program	250	250	0	1.0500	Each	-	\$262.50
	Imprint area: 2" x 2" Artwork needed in black							
set-up	set-up charge	1	1	0	40.0000	Each	-	\$40.00
Lanyard	3/4 Lanyard Dye sublimated lanyard Green lanyard, close to PMS 343 white imprint Lobster claw	100	100	0	1.8500	Each	-	\$185.00
set-up	set-up charge	1	1	0	40.0000	Each	-	\$40.00
Notebook	Rubbery Spiral Notebook Black White imprint	100	100	0	2.1000	Each	-	\$210.00
set-up	set-up charge	1	1	0	40.0000	Each	-	\$40.00
Pink Neon Clip	Neon Power Clip Pink White imprint	250	250	0	0.9500	Each	-	\$237.50

### Remittance Advice - Shown on last page

Billed Customer #	Bill Number	Bill Date	Amount Due
Continued	Continued	Continued	Continued

Customer PO: P0015801

Customer Reference: New Items

Item #	Item Description	QTY Billed	QTY Ordered	Back Order	Unit Price	Per	Credit	Amount
set-up	set-up charge	1	1	0	50.0000	Each	-	\$50.00
Round Cold Packs	Round Hot/Cold Packs							
	Blue	150	150	0	1.0500	Each	-	\$157.50
	White imprint							
set-up	set-up charge	1	1	0	60.0000	Each	-	\$60.00
Lip Balm	Round Scented Lip Balm							
	Green	125	125	0	1.0500	Each	-	\$131.25
	Melon							
	Black imprint							
set-up	set-up charge	1	1	0	60.0000	Each	-	\$60.00
Doctor Duck	Doctor Rubber Duck							
	Black imprint	150	150	0	2.0000	Each	-	\$300.00
	Imprint area: 1"w x 0.5"h							
set-up	set-up charge	1	1	0	40.0000	Each	-	\$40.00
Test Tube Mints	Test Tube Mints							
	White mints	150	150	0	1.7500	Each	-	\$262.50
	Black imprint							
	Imprint area: 2"w x 5/16"h							
set-up	set-up charge	1	1	0	50.0000	Each	-	\$50.00
Charging Cable	4 in 1 Charging Cable Set							
	Green	100	100	0	2.9500	Each	-	\$295.00
	Black imprint							
set-up	set-up charge	1	1	0	50.0000	Each	-	\$50.00
Whistle Key	Whistle Light Key Chain							
	Sage	150	150	0	0.7900	Each	-	\$118.50
	White imprint							
	I							
set-up	set-up charge	1	1	0	40.0000	Each	-	\$40.00
Lip Balm	Round Scented Lip Balm							
	Orange	125	125	0	1.0500	Each	-	\$131.25
	Creamsicle							
	Black imprint							
set-up	set-up charge	1	1	0	60.0000	Each	-	\$60.00
Line-Item Total	Freight Amount	Tax Amount	Sub Total	Deposits	Credits/Discounts	Amount Due:		
\$3,182.25	\$470.00	-	\$3,652.25	-	-	\$3,652.25 USD		

Bills that are paid beyond terms will be adjusted to reflect current retail prices in addition to a 1.5% per month (18% per annum) service charge. Vendor makes no warranties, express or implied, on merchantability, fitness or otherwise which extend beyond the description of the product herein. Furthermore, buyer agrees through payment of this bill that Vendor's damages, if any, shall be limited to the total selling price of any item purchased.

Please indicate on your remittance the bill numbers to which the payment is to be applied.

Thank you for your business!

Please detach this portion and return with your payment.

Remittance Advice

Billed Customer #	Bill Number	Bill Date	Amount Due
C0E3500193	BE35002610A	3/4/2025	\$3,652.25 USD

BILL TO:

College of DuPage  
425 Fawell Blvd.  
Glen Ellyn, IL 60137

PLEASE SEND PAYMENT TO:  
Proforma  
P.O. Box 640814  
Cincinnati, OH 45264-0814

"Franzen, Sue" <sue.franzen@proforma.com>

---

[External] Purchase Order P0015801 - Bill #BE35002610A from Proforma Premiums

---

"Franzen, Sue" <sue.franzen@proforma.com>

Wed, Mar 5, 2025 at 05:09 PM UTC

CC: Lang, Jessica <langj@cod.edu>

BCC:

**CAUTION:** This email originated from outside of COD's system. Do not click links, open attachments, or respond with sensitive information unless you recognize the sender and know the content is safe.

Attached are the following bill(s):

BE35002610A | 3652.25 USD | 03/04/2025 | PO #: P0015801

Please let me know if you have any questions or need additional information.

Thank you very much for your business!

**Proforma Premiums**

**Sue Franzen** • Owner

520 Kingsway Drive • Aurora, IL 60506

630.844.3147 • sue.franzen@proforma.com

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**2 attachments**

Customer\_Bill\_BE35002610A.pdf

image001.jpg



**Information:**

**Drawer:** Accounts Payable - Invoices

**Vendor Number:** 1512676

**Vendor Name:** Sue Franzen

**Check Details:**

**Check Number:** E0106410

**Check Amount:** \$ 9,814.85

**Check Date:** 3/18/2025

**Invoice Details:**

**Invoice Number:** BE35002617A

**Invoice Date:** 3/10/2025

**PO Number:** P0015918

**Voucher Number:** V0876034

**Document Type:** AP Invoice

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**Document Below**



## Original Bill

Bill Number BE35002617A  
Bill Date 3/10/2025  
**Due Date 5/8/2025**  
Terms Net 60  
Sales Order SE35002617  
Sales Person Sue Franzen

### Proforma Premiums

Telephone: 630-844-3147  
Email: [sue.franzen@proforma.com](mailto:sue.franzen@proforma.com)

### Sold To

Lynda Nagle  
College of DuPage  
525 Fawell Blvd.  
Glen Ellyn, IL 60137  
Phone: 630-942-2441  
[naglel@cod.edu](mailto:naglel@cod.edu)

### Shipped To

College of DuPage  
Lynda Nagle  
Rec #P0015918  
425 Fawell Blvd.  
Glen Ellyn, IL 60137

**Customer PO: P0015918**

**Customer Reference: COD T-Shirts**

Item #	Item Description	QTY Billed	QTY Ordered	Back Order	Unit Price	Per	Credit	Amount
5000	Gildan - Heavy Cotton 100% Cotton T-Shirt. <b>Color: <u>Charcoal</u>: 40 - S, 100 - M, 100 - L, 30 - XL</b>	270	270	0	5.7500	Each	-	\$1,552.50
	2xlarge	30	30	0	8.0000	Each	-	\$240.00
	3xlarge	1	1	0	11.0000	Each	-	\$11.00
	4xlarge	1	1	0	11.0000	Each	-	\$11.00
Line-Item Total		Freight Amount		Tax Amount		Sub Total		Deposits
\$1,814.50		\$90.00		-		\$1,904.50		Credits/Discounts
								<b>Amount Due:</b>
								<b>\$1,904.50 USD</b>

Bills that are paid beyond terms will be adjusted to reflect current retail prices in addition to a 1.5% per month (18% per annum) service charge. Vendor makes no warranties, express or implied, on merchantability, fitness or otherwise which extend beyond the description of the product herein. Furthermore, buyer agrees through payment of this bill that Vendor's damages, if any, shall be limited to the total selling price of any item purchased.

Please indicate on your remittance the bill numbers to which the payment is to be applied.

**Thank you for your business!**

-----  
Please detach this portion and return with your payment.

### Remittance Advice

Billed Customer #	Bill Number	Bill Date	Amount Due
C0E3500193	BE35002617A	3/10/2025	\$1,904.50 USD

### BILL TO:

College of DuPage  
Accounts Payable  
425 Fawell Blvd.  
Glen Ellyn, IL 60137

### PLEASE SEND PAYMENT TO:

Proforma  
P.O. Box 640814  
Cincinnati, OH 45264-0814

Sue Franzen <sue.franzen@proforma.com>

---

**[External] Purchase Order P0015918 - Bill #BE35002617A from Proforma Premiums**

---

Sue Franzen <sue.franzen@proforma.com>

Mon, Mar 10, 2025 at 03:59 PM UTC

CC: Nagle, Lynda <naglel@cod.edu>

BCC:

**CAUTION:** This email originated from outside of COD's system. Do not click links, open attachments, or respond with sensitive information unless you recognize the sender and know the content is safe.

Attached are the following bill(s):

BE35002617A | 1904.50 USD | 03/10/2025 | PO #: P0015918

Please let me know if you have any questions or need additional information.

Thank you very much for your business!

**Sue Franzen**

Owner

(630) 844-3147

Proforma Premiums

<http://www.proforma.com/premiums>

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**1 attachment**

Customer\_Bill\_BE35002617A.pdf

**Information:**

**Drawer:** Accounts Payable - Invoices

**Vendor Number:** 1512676

**Vendor Name:** Sue Franzen

**Check Details:**

**Check Number:** E0106410

**Check Amount:** \$ 9,814.85

**Check Date:** 3/18/2025

**Invoice Details:**

**Invoice Number:** BE35002619A

**Invoice Date:** 3/10/2025

**PO Number:** P0015942

**Voucher Number:** V0876134

**Document Type:** AP Invoice

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**Document Below**



## Original Bill

Bill Number BE35002619A  
Bill Date 3/10/2025  
**Due Date 5/8/2025**  
Terms Net 60  
Sales Order SE35002619  
Sales Person Sue Franzen

### Proforma Premiums

Telephone: 630-844-3147  
Email: [sue.franzen@proforma.com](mailto:sue.franzen@proforma.com)

### Sold To

Sandy McKeen  
College of DuPage  
425 Fawell Blvd.  
Glen Ellyn, IL 60137  
Phone: 630-942-2237  
[mckeens@cod.edu](mailto:mckeens@cod.edu)

### Shipped To

College of DuPage  
Sandy McKeen  
Rec PO#P0015942  
425 Fawell Blvd.  
Glen Ellyn, IL 60137

**Customer PO: P0015942**

**Customer Reference: umbrellas, spring coils, XL highlighters**

Item #	Item Description	QTY Billed	QTY Ordered	Back Order	Unit Price	Per	Credit	Amount
Umbrella	Go Go Shed Rain 44" Arc RPET Auto Open Compact Umbrella Gray umbrella-2024 - Clearance Item 140 pieces Black - 13 pieces - 2024 Black/white umbrella 2024 - Clearance Item 23 2024 pieces One color imprint in white	176	176	0	5.5000	Each	-	\$968.00
set-up	set-up charge	1	1	0	55.0000	Each	-	\$55.00
Rainbow Coils	Rainbow Spring Coils One color imprint in white	300	300	0	1.9500	Each	-	\$585.00
set-up	set-up charge	1	1	0	60.0000	Each	-	\$60.00
6250	X-Large Jumbo Highlighters Green - 125 pieces Blue - 100 pieces Pink - 100 pieces One color imprint in black	325	325	0	2.0500	Each	-	\$666.25
set-up	set-up charge	1	1	0	60.0000	Each	-	\$60.00
Line-Item Total	Freight Amount	Tax Amount	Sub Total	Deposits	Credits/Discounts	<b>Amount Due:</b>		
\$2,394.25	\$205.85	-	\$2,600.10	-	-	<b>\$2,600.10 USD</b>		

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**Thank you for your business!**

-----  
*Please detach this portion and return with your payment.*

### Remittance Advice

Billed Customer #	Bill Number	Bill Date	Amount Due
C0E3500193	BE35002619A	3/10/2025	\$2,600.10 USD

### BILL TO:

College of DuPage  
Accounts Payable  
425 Fawell Blvd.  
Glen Ellyn, IL 60137

### PLEASE SEND PAYMENT TO:

Proforma  
P.O. Box 640814  
Cincinnati, OH 45264-0814

Sue Franzen <sue.franzen@proforma.com>

---

**[External] Purchase Order P0015942 - Bill #BE35002619A from Proforma Premiums**

---

Sue Franzen <sue.franzen@proforma.com>

Mon, Mar 10, 2025 at 04:23 PM UTC

CC:

BCC:

**CAUTION:** This email originated from outside of COD's system. Do not click links, open attachments, or respond with sensitive information unless you recognize the sender and know the content is safe.

Attached are the following bill(s):

BE35002619A | 2600.10 USD | 03/10/2025 | PO #: P0015942

Please let me know if you have any questions or need additional information.

Thank you very much for your business!

**Sue Franzen**

Owner

(630) 844-3147

Proforma Premiums

<http://www.proforma.com/premiums>

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**1 attachment**

Customer\_Bill\_BE35002619A.pdf