

Information:

Drawer: Accounts Payable - Invoices **Vendor Number:** 1512676 **Vendor Name:** Sue Franzen

Check Details:

Check Number: E0110624 **Check Amount:** \$ 1,135.50 **Check Date:** 11/18/2025

Invoice Details:

Invoice Number: BE35002900A **Invoice Date:** 11/11/2025 **PO Number:** P0020162 **Voucher Number:** V0913449

Document Type: AP Invoice

Document Below



Original Bill

Bill Number BE35002900A
Bill Date 11/11/2025
Due Date 1/9/2026
Terms Net 60
Sales Order SE35002900
Sales Person Sue Franzen

Proforma Premiums

Telephone: 630-844-3147
Email: sue.franzen@proforma.com

Sold To

Tracey Dulceak
College of DuPage
425 Fawell Blvd.
Glen Ellyn, IL 60137
Phone: 630-942-2514
dulceakt@cod.edu

Shipped To

College of DuPage
Tracey Dulceak
Rec #P0020162
425 Fawell Blvd.
Glen Ellyn, IL 60137

Customer PO: P0020162

Customer Reference: Colored Pencils and Power Clips

Item #	Item Description	QTY Billed	QTY Ordered	Back Order	Unit Price	Per	Credit	Amount
Colored Pencils	12 piece colored pencil set Exact repeat of previous order PE35002498C	250	250	0	1.6500	Each	-	\$412.50
repeat	repeat set-up charge	1	1	0	25.0000	Each	-	\$25.00
Power Clip	Power Clip Light Translucent green / black White imprint	250	250	0	1.3500	Each	-	\$337.50
Line-Item Total	Freight Amount	Tax Amount	Sub Total	Deposits	Credits/Discounts	Amount Due:		
\$775.00	\$60.00	-	\$835.00	-	-	\$835.00 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	BE35002900A	11/11/2025	\$835.00 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 P0020162 - Bill #BE35002900A from Proforma Premiums

Sue Franzen <sue.franzen@proforma.com>

Tue, Nov 11, 2025 at 07:08 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 is the following bill(s):

Customer Bill: BE35002900A | 835.00 USD | 11/11/2025 | PO #: P0020162

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>

1 attachment

Customer_Bill_BE35002900A.pdf

Information:

Drawer: Accounts Payable - Invoices **Vendor Number:** 1512676 **Vendor Name:** Sue Franzen

Check Details:

Check Number: E0110624 **Check Amount:** \$ 1,135.50 **Check Date:** 11/18/2025

Invoice Details:

Invoice Number: BE35002907A **Invoice Date:** 11/14/2025 **PO Number:** P0020227 **Voucher Number:** V0914005

Document Type: AP Invoice

Document Below



Original Bill

Bill Number BE35002907A
Bill Date 11/14/2025
Due Date 1/12/2026
Terms Net 60
Sales Order SE35002907
Sales Person Sue Franzen

Proforma Premiums

Telephone: 630-844-3147
Email: sue.franzen@proforma.com

Sold To

Jessica Lang
College of DuPage
425 Fawell Blvd.
Glen Ellyn, IL 60137
Phone: 630-942-2447
langj@cod.edu

Shipped To

College of DuPage
Jessica Lang
Rec #P0020227
425 Fawell Blvd.
Glen Ellyn, IL 60137

Customer PO: P0020227

Customer Reference: First Aid Kits - Direct Imprint

Item #	Item Description	QTY Billed	QTY Ordered	Back Order	Unit Price	Per	Credit	Amount
First Aid Kits	First Aid Kits Black Direct print in white	250	250	0	1.0900	Each	-	\$272.50

Line-Item Total	Freight Amount	Tax Amount	Sub Total	Deposits	Credits/Discounts	Amount Due:
\$272.50	\$28.00	-	\$300.50	-	-	\$300.50 USD

Notes:

Discounted Item for this order

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	BE35002907A	11/14/2025	\$300.50 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 P0020227 - Bill #BE35002907A from Proforma Premiums

Sue Franzen <sue.franzen@proforma.com>

Fri, Nov 14, 2025 at 07:48 PM UTC

CC:

BCC:

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Attached is the following bill(s):

Customer Bill: BE35002907A | 300.50 USD | 11/14/2025 | PO #: P0020227

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>

1 attachment

Customer_Bill_BE35002907A.pdf