

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1453308

Vendor Name: Alliance Paper and Food Service Inc.

Check Details:

Check Number: 0344216

Check Amount: \$ 567.66

Check Date: 9/30/2025

Invoice Details:

Invoice Number: 1213612-00

Invoice Date: 9/10/2025

PO Number: B0002860

Voucher Number: V0904684

Document Type: AP Invoice

Document Below



11058 West Addison Street
Franklin Park, IL 60131
(847) 349-1500
www.AlliancePFS.com

Emergency Phone Number:
(INFOTRAC) 800-535-5053 ACCT: 89390

INVOICE

Remit To: 11058 W. Addison St.
Franklin Park, IL 60131

Customer #	Invoice Date	Invoice #
21803	09/10/25	1213612-00
Tax ID	PO #	Page #
E99973391	TOM EMAILED	1 of 1
Entered By	Instructions	
Janet Flynn		

**** Ask About Our PPE Products!! ****

Bill To: COD LIBERAL ARTS
425 FAWELL BLVD
MAC 201
GLEN ELLYN, IL 60137

Contact #: (630)942-2056

Ship To: COD LIBERAL ARTS
425 FAWELL BLVD
MAC 201
GLEN ELLYN, IL 60137

Terms		Ship Point		Ship Via		Shipped		
NET30		Alliance Paper and Foodservice		OUR TRUCK		09/10/25		
Line #	Product And Description	Quantity Ordered	Quantity B/O	Quantity Shipped	Qty U/M	Unit Price	Ext. Price	Tax
1	SO-412W CUP Paper Hot 12oz Wht 20/50ct	2	0	2	CS	75.59	151.18	N
2	SO-T316R LID Hot Traveler Dome Wht w/Sip Hole 10/100	2	0	2	CS	36.57	73.14	N
3	132101 STRAW Bulk 7.75" Jumbo Blk 10/500	1	0	1	CS	43.97	43.97	N
4	132134 STRAW Bulk 5.25" SipStix Blk 10/1M	1	0	1	BX	2.70	2.70	N
5	736984 SLEEVE For Hot Cup 10-24oz Plain Kft 1000ct	1	0	1	CS	35.06	35.06	N
6	64030 TUMBLER Plas Clr 9oz Sqt 20/25ct N92521	1	0	1	CS	64.26	64.26	N
7	150701 BOX Popcorn Scoop Red Wht Stripe 1.75oz 500ct	5	5	0	CS	253.96	0.00	N
8	SO-662TP LID Plas Clr NoVent Flat 10/100ct	3	0	3	CS	37.53	112.59	N
9	63960 SHOTGLASS Plas Clr 1oz 50/50ct N15021	1	0	1	SL	3.53	3.53	N
10	6135 PLATE Plas Impact Blk 6" 8/125ct	1	0	1	CS	55.75	55.75	N
11	MX380UD4 FORK Sty xHW Blk 1M	1	0	1	CS	25.48	25.48	N

11 Lines Total Total Units 14 Total Amount Due 567.66
Total Weight: 172.73 Total Cubic Volume: 41.18

BO 002860
05-60-11301-5408001
607 Foods/Gen

Signature: _____

Date Received: _____

A LATE PAYMENT FEE OF 1.5% PER MONTH WILL BE APPLIED TO ALL INVOICES NOT PAID WITHIN THE TERMS OF SALE. NO RETURNS, REFUNDS, STORE CREDIT OR EXCHANGES ON SPECIAL ORDER, RED TAG OR CLOSEOUT ITEMS. CREDIT ON RETURNED MERCHANDISE WILL ONLY BE GIVEN IF ACCOMPANIED BY THE INVOICE ON WHICH THE ITEM WAS PURCHASED & BY A RETURN AUTHORIZATION FORM. NO ITEM ACCEPTED AFTER 30 DAYS FROM INVOICE PURCHASE DATE. A 20% RESTOCKING FEE & FREIGHT WILL APPLY ON ALL RETURNED MERCHANDISE.

Customer Copy

... Last Page

"Sharbaugh, Linda" <sharbaughl@cod.edu>

Alliance Inv 1213612-00 \$567.66

"Sharbaugh, Linda" <sharbaughl@cod.edu>

Thu, Sep 11, 2025 at 05:05 PM UTC

CC:

BCC:

For processing. Thank you!

Linda Sharbaugh

McAninch Arts Center, College of DuPage

sharbaughl@cod.edu | 630-942-3009

pronouns: she/her

1 attachment

Alliance Inv 1213612-00 567.66 9.11.25.pdf