

**Information:**

**Drawer:** Accounts Payable - Invoices

**Vendor Number:** 1086105

**Vendor Name:** ICCSAA

**Check Details:**

**Check Number:** E0109672

**Check Amount:** \$ 150.00

**Check Date:** 9/23/2025

**Invoice Details:**

**Invoice Number:** 09152025

**Invoice Date:** 9/15/2025

**PO Number:** NULL

**Voucher Number:** V0904486

**Document Type:** AP Invoice

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**Document Below**

Please charge \$100 to 05-60-12931-5406002 and \$50 to 05-60-12691-5406002

Thank you! FH

Illinois Community College Student Activities Association (ICCSAA)

INVOICE



Date: 09/15/2025

Institution: College of DuPage

Contact: Chuck Steele

Address: 425 Fawell Blvd  
Glen Ellyn  
Illinois 60137-6708

To be paid		
2025 - 2026 ICCSAA Membership		
Date	Description	Cost
09/15/2025	Registration for (1) year institutional membership	\$150.00
TOTAL DUE		\$150.00

**PAYMENTS SHOULD BE SENT TO:**

Genny Stevens  
Carl Sandburg College  
2400 Tom L. Wilson Blvd.  
Galesburg, IL 61401

**MAKE CHECKS PAYABLE TO:** Illinois Community College Student Activities Association (ICCSAA)

"Hailu, Fasika" <hailuf@cod.edu>

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**Student Life: ICCSAA Staff Membership Invoice**

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"Hailu, Fasika" <hailuf@cod.edu>

Fri, Sep 19, 2025 at 08:08 PM UTC

CC:

BCC:

Hello,

Attached is an invoice for Student Life ICCSAA Membership.

Thanks,

**Fasika Hailu** (she/her)

Administrative Assistant IV

Office of Student Life | SSC 1111

College of DuPage | Glen Ellyn, IL 60137

[hailuf@cod.edu](mailto:hailuf@cod.edu) | 630-942-3849

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**1 attachment**

ICCSAA Staff Membership Invoice.pdf