

Information:

Drawer: Accounts Payable - Invoices **Vendor Number:** 1379495 **Vendor Name:** Marsh USA Inc.

Check Details:

Check Number: 0346565 **Check Amount:** \$ 400.00 **Check Date:** 11/18/2025

Invoice Details:

Invoice Number: 552188979635 **Invoice Date:** 11/5/2025 **PO Number:** NULL **Voucher Number:** V0914082

Document Type: AP Invoice

Document Below



Marsh USA LLC
Chicago IL
(312) 627-6000

INVOICE

Page	1 of 2
Invoice Total	400.00 USD
Invoice No.	552188979635
Invoice Date	11/05/2025
Client No.	5521846219

Billed To: **College of DuPage**
College of Dupage
425 Fawell Blvd
SRC 2130L
Glen Ellyn, IL 60137

Remittance Copy

Company earns and retains interest income on premium payments held by Marsh on behalf of insurers during the period between receipt of such payments from clients and the time such payments are remitted to the applicable insurer, where permitted by law.

Detach and remit this portion with your payment

Client No.	Invoice No.	Payment Due	Invoice Total	Amount Paid
5521846219	552188979635	Immediate	400.00 USD	

Thank you for your prompt payment.

Please indicate Invoice Number 552188979635 on your remittance.

Additionally, for ACH or wire payments, e-mail remittance detail to: FiduciaryserviceRequest.US@marsh.com

By ACH: **Bank Name:** Bank of America
ACH Routing No: 071000039
Account Title: Marsh USA LLC
Account Number: 8188190995

By Wire: **Bank Name:** Bank of America
Wire Routing Number: 026009593
Account Title: Marsh USA LLC
Account Number: 8188190995

By Mail: Marsh USA LLC
62505 Collection Center Drive
Chicago, IL 60693-0625 USA

5521889796356 000004000080



INVOICE

Marsh USA LLC
Chicago IL
(312) 627-6000

Page	2 of 2
Invoice Total	400.00 USD
Invoice No.	552188979635
Invoice Date	11/05/2025
Client No.	5521846219

College of DuPage
College of Dupage
425 Fawell Blvd
SRC 2130L
Glen Ellyn, IL 60137

Billed To:

Surety Name	Bond No.	Effective Date	Expiration Date	Transaction Type	Description/ Type of Coverage	Item	Amount
Travelers Cas & Surety Of Am er.	105694413	11/21/2025	11/21/2026	Original	Commercial Bond	PREMIUM	400.00
Invoice Comments: Principal:College of DuPage Obligee:People of the State of Illinois Bond Amount: \$40,000.00 Bond Type - Description:License & Permit - Truck Driver Training School License & Permit Bond Requester:Jim Vegetabile							
Invoice Total (Payable in Full upon Receipt)							400.00

Company earns and retains interest income on premium payments held by Marsh on behalf of insurers during the period between receipt of such payments from clients and the time such payments are remitted to the applicable insurer, where permitted by law.

"account.information@marsh.com" <account.information@marsh.com>

[External] Marsh Invoice for College of Dupage - Invoice# 552188979635

"account.information@marsh.com" <account.information@marsh.com>

Wed, Nov 5, 2025 at 10:01 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 your latest invoice from Marsh. For questions regarding this message, please contact your Marsh Client Servicing Team. Note: the invoice number is also part of the file name. Thank you for choosing Marsh. We value your business. DO NOT REPLY TO THIS MESSAGE. All replies are automatically deleted.

1 attachment

20251105-MARSH_SU-552188979635.pdf