



Instructions: When there is not an "Official" Invoice to request payment, complete the information on this form.

1. You must fill in all of the fields below and the form must be accompanied with supporting documentation.
2. Save submission as 1 single PDF file prior to submitting to nassapinvoicesubmission@pepsico.com
3. The form can be used for the following invoice/payment type activity: Taxes/Legal Settlements/Business Licenses/Fines/Donation/sponsorship.

SAP Payment Request **Substitute Invoice Form**

To be filled by Requestor

Vendor Type	S4
Vendor Name:	Northern Gold Foods
Vendor Number:	2004693975
Company Code:	US0C
Remit To Address : (Must match the address in the AP system)	Meadowview RD Junction City, OR 29323
Special Handling needed:	
Attn:	
Address:	
Overnight delivery required: (If yes provide account # or CC below)	
FedEx or UPS, & Provide Number:	
FedEx or UPS account #	
Cost Center (if No FedEx/UPS Number):	
Transaction type: Choose only 1 option - Invoice or Credit Memo from the dropdown	Credit Memo
Invoice Date:	7/1/2025
Invoice #: Limited to 16 characters	5469
Purchase Order # Not required if non-PO	
Payment GROSS Amount:	\$5,044.15
Tax Amount (if applicable)	
Payment NET Amount:	\$5,044.15
Currency (USD or CAD)	USD
Header Text:	June 4, 2025 Binder Syrup Trial
Requestor Name:	Andrew Painter
Requestor email	andrew.painter2@pepsico.com/81013814
1st Level Approver Name	Samantha Hansen
1st Level Approver Email id/GPID	samantha.hansen@pepsico.com /71051758
Date Requested:	10/23/2025
GL Coding (6 digits)	666666
Cost Center (if applicable)	8553050200
Profit Center (if applicable)	95USL20000
WBS Element (if applicable)	N/A
For Assistance On This Form submission please contact:	
Raise service now ticket(Snow)	PepsiCo - Sign In



Remit to: Northern Gold Foods (USA), LLC
28323 Meadowview Rd
Junction City, OR 97448
Telephone: (541)-463-2480
Fax: (541)-463-2497 www.northerngold.com

INVOICE

INVOICE NUMBER: 5489

CUSTOMER PEPSICO, INC
NASS ACCOUNTS PAYABLE, PO
BOX 1800
WINSTON SALEM

SHIP TO:

TELEPHONE:
SHIP VIA:

INVOICE DATE	ORDER DATE	DATE SHIPPED	DELIVERY NOTE	PURCHASE ORDER	TERMS
07/01/25	07/01/25	07/01/25	005542	4802290344	NET 60 DAYS

ORDERED	CODE	DESCRIPTION	SHIPPED	UNIT	NET PRICE	NET AMOUNT
		JUNE 4, 2025 BINDER SYRUP TRIAL:				
		PLANT TIME				5000.00
		INGREDIENTS SUPPLIED BY NORTHERN GOLD - LECITHIN				44.15

WEIGHT: 0.000 NUMBER OF PIECES: 0

TOTAL AMOUNT
USD 5044.15

From: SPA - PepsiCo Nass AP Invoice Submission <nassapInvoiceSubmission@pepsico.com>

Sent: Tue, 28 Oct 2025 15:13:05 (UTC)

To: svcimagingspaboxprod@pepsico.com

Subject: FW: Credit Process Request

Original Number of Attachments : 3

Original Attachment Names: Payment Request - 81013814 10-23

(2).xlsx,Invoice_000000000005469.pdf,Payment Request - 81013814 10-23.pdf

Number of forwarded PDF's: 2

Number of forwarded Non PDF files: 1

From: Painter, Andrew {PEP} <Andrew.Painter2@pepsico.com>

Sent: Tuesday, October 28, 2025 3:11:25 PM

To: SPA - PepsiCo Nass AP Invoice Submission <nassapInvoiceSubmission@pepsico.com>

Subject: Credit Process Request

Please process the attached credit.