



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 nassopinvoicessubmission@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:	FORT DEARBORN DBA MULTI-COLOR CORPORATION
Vendor Number:	2000016941
Company Code:	
Remit To Address : <i>(Must match the address in the AP system)</i>	FORT DEARBORN COMPANY P.O. BOX 74008096 CHICAGO, IL 60674-8096
Special Handling needed:	
Attn:	
Address:	
Overnight delivery required: <i>(If yes provide account # or CC below)</i>	
FedEx or UPS, & Provide Number:	
FedEx or UPS account #:	
Cost Center (if No FedEx/UPS Number):	
Transaction type: <i>Choose only 1 option - Invoice or Credit Memo from the dropdown</i>	Invoice
Invoice Date:	4/28/2025
Invoice #: <i>Limited to 16 characters</i>	369471911
Purchase Order # <i>Not required if non-PO</i>	
Payment GROSS Amount:	\$128.08
Tax Amount <i>If applicable</i>	
Payment NET Amount:	\$128.08
Currency (USD or CAD)	USD
Header Text:	
Requestor Name:	CHANEL DOCTOR
Requestor email	
1st Level Approver Name	KAHRI KOELLNER
1st Level Approver Email Id/GPID	KAHRI.KOELLNER@PEPSICO.COM
Date Requested:	7/28/2025
GL Coding (6 digits)	
Cost Center <i>(If applicable)</i>	
Profit Center <i>(If applicable)</i>	
WBS Element <i>(If applicable)</i>	
For Assistance On This Form submission please contact: Raise service now ticket(Snow)	PepsiCo Sign In



Fort Dearborn DBA Multi-Color Corporation
Tyrone Plant *13985 South Eagle Valley Road, Tyrone, PA 16686
* *Fax

SOLD TO
Pepsi Bottling Company - PEPS044
Philadelphia
FREIGHT CHARGES ONLY
Philadelphia PA 19154

INVOICE NUMBER	369471911
INVOICE DATE	04/28/2025
TERMS	Net 60 Days
CUSTOMER PO	4501983265

Qty Shipped / Term	Description	Price	Amount
0	Extra Freight Charge Customer Invoice #369471872 Customer PO #4501983265 Customer BOL #10337963	\$.00/0	\$0.00

Comments:

Questions: AR_FDC@fortdearborn.com	Subtotal	\$0.00
Comments:	Tax Total	0
	Shipping & Handling	\$128.08
	Invoice Total USD	\$128.08

Remittance Instructions

Wire and ACH Transfers:

Bank: Bank of America
Account Name: Fort Dearborn Company
ABA Routing (Wires): 026009593
ABA Routing (ACH): 071000039
Swift Code: BOFAUS3N
Account Number: 8670408119

Checks

Fort Dearborn Company
P.O. Box 74008096
Chicago, IL 60674-8096

From: SPA - PepsiCo Nass AP Invoice Submission <nassapInvoiceSubmission@pepsico.com>
Sent: Tue, 29 Jul 2025 16:37:11 (UTC)
To: svcimagingspaboxprod@pepsico.com
Subject: Forwarded : Payment Request
Importance: Low

Original Number of Attachments : 14

Original Attachment Names: 369363639.pdf; 369471911.pdf; 369444607.pdf; 369469468.pdf; 369470737.pdf; 369431787.pdf; 369436887.pdf; 369423973.pdf; 369421343.pdf; 369411582.pdf; 369418831.pdf; 369416864.pdf; 369408650.pdf; 369408615.pdf;

Number of Removed: 0

Removed Attachment Names: NA

Number of forwarded PDF's: 14

Number of forwarded not PDF files: 0

---- Original email:

From: Chanel.Doctor@pepsico.com
Sent: Tuesday, July 29, 2025 4:35:10 PM
To: NASSAPIvoiceSubmission@pepsico.com
Subject: Payment Request



Hello,

I have attached 14 separate invoices that need to be processed for payment for the same supplier. If a separate email is needed for each attachment, please let me know.

**Thank You,
Chanel Doctor
215-490-2242
Pepsi Beverage Company
chanel.doctor@pepsico.com**

