

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 0269421
Vendor Name: Ms Maureen N. Dunne
Invoice Number: 051420
Invoice Date: 05/14/20
PO Number:
Check Number: 0268301
Check Amount: \$ 1,665.45
Check Date: 06/10/2020
Department ID: 00813
Reviewer Name:
Voucher Number: V0622654
Redaction Type: None
Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: zerrudom@cod.edu
Sent: Thu May 14 14:12:35 CDT 2020
To: invoicing@cod.edu
CC:
Subject: FW: Trustee Reimbursable Expenses

From: Carrillo, Erin
Sent: Thursday, May 14, 2020 1:55 PM
To: Zerrudo, Maria <zerrudom@cod.edu>
Subject: Trustee Reimbursable Expenses
Importance: High

Please process the attached request for payment. This is for Trustee Maureen Dunne and her VN # 0269421. If you have any questions, please contact me immediately.

Thank you.



Erin Carrillo
Office of the President
425 Fawell Blvd.
Glen Ellyn, IL 60137
(630) 942-2203
carriloe42@cod.edu



College of DuPage

FINAN-15-18226(2/15)

COLLEGE OF DuPAGE
SPECIAL BOARD MEETING

BOARD APPROVAL

1. SUBJECT

Approval for Trustee, Maureen Dunne, to attend the Association of Community College Trustees, (ACCT), Governance Leadership Institute in Washington DC, August 8-10, 2019; and for the College of DuPage to reimburse allowable expenses up to \$1,500.00.

2. REASON FOR CONSIDERATION

In accordance with provisions of Board Policy 5-195, Trustee Education and Attendance at Conferences, Board approval is required.

3. BACKGROUND INFORMATION

The College has been active in ACCT over the years, including appointments to committees and presenting at ACCT conferences.

The Governance Leadership Institute is an orientation to board governance, important for new Trustees.

The requested \$1,500.00 will cover the registration for the conference at the early bird rate of \$650.00 for the Trustee. (The early bird rate ends July 8, 2019.) This will also help cover airfare and hotel accommodations. Anything above the \$1,500.00 will be covered at the Trustee's expense

The request complies with Board Policy.

Budget Status

GL Account	FY2019	FY2020		
	YTD Spend	Annual Budget	YTD Spend	Available Balance
01-90-00813-5503005	\$ 2,983	\$ 6,000	\$ -	\$ 6,000
<i>Board of Trustees: Travel-Out of State</i>				
FY2020 Request				<u>\$ 1,500</u>

*FY2020 Budget not yet adopted. YTD Spend as of 06/11/2019

4. **RECOMMENDATION**

That the Board of Trustees approves Trustee, Maureen Dunne to attend the Association of Community College Trustees, (ACCT), Governance Leadership Institute in Washington DC August 8-10, 2019; and for College of DuPage to reimburse allowable expenses up to \$1,500.00.

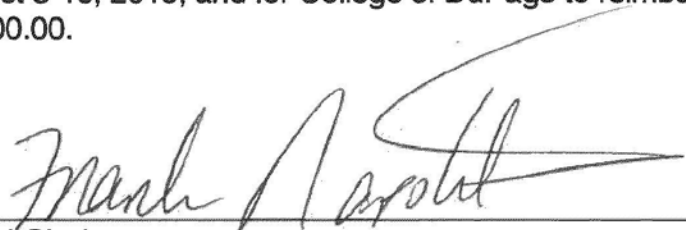
BOARD APPROVAL

SIGNATURE PAGE

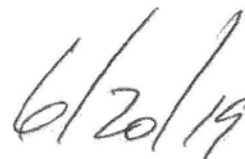
Trustee Maureen Dunne attend the Association of Community College Trustees, (ACCT),
Governance Leadership Institute in Washington DC August 8-10, 2019

ITEM(S) ON REQUEST


That the Board of Trustees approves Trustee, Maureen Dunne to attend the Association of
Community College Trustees, (ACCT), Governance Leadership Institute in Washington DC
August 8-10, 2019; and for College of DuPage to reimburse allowable expenses up to
\$1,500.00.



Board Chair



Date



Board Secretary



Date

Employees requesting reimbursement for expenditures of \$100.00 or greater are required to obtain prior approval via the Pre-Travel Approval/Advance Form regardless if the reimbursement is non-travel related. Employees requesting a travel advance are to submit the approved form to the Manager of Cash Disbursements at least three weeks prior to the trip departure date. Advances will be issued at 90% of the total estimated expenses to be reimbursed. The advanced amount must be \$100.00 or greater but not to exceed \$3,000.00. Exceptions will be reviewed on a case-by-case basis. An employee may only have one outstanding advance at a time.

Date: June 20, 2019

Name: Maureen Dunne Colleague ID#: _____ Extension: 2203 Dept. No.: Board of Trustees

A. Name of Professional Meeting or Conference: Governance Leadership Institute

Location: Washington, DC Date(s): August 8 - 10, 2019

B. Institutional Business: _____

Destination: _____ Date(s): _____

C. Faculty complete item 1, administrators complete item 2, below.

1. Provisions for classes missed: _____

2. Name of person to whom administrative responsibilities have been delegated: _____

Estimated expense to be reimbursed

Private auto (@ \$0.565 per mile) _____
 Vehicle Rental _____
 Registration Fee \$650.00
 Lodging (See instruction-d) \$450.00
 Meals (See instruction-f) _____
 Airfare \$400.00
 Other (specify) _____

TOTAL \$1,500.00

Estimated expense paid direct by College

(Submit requisitions via Mercury Commerce for PO Issuance)
 College vehicle _____
 Registration Fee _____
 Lodging _____
 Airfare _____
 Other (specify) _____
 Other (specify) _____

TOTAL _____

EMPLOYEE STATEMENT

☐ I REQUEST AN ADVANCE OF 90% OF THE ESTIMATED EXPENSES TO BE REIMBURSED AS SHOWN ABOVE.

↑ (Above box must be checked for Advance to be processed.) DATE ADVANCE WILL BE REQUIRED: _____

By signing this Pre-Travel Approval/Advance Form, the employee acknowledges that he/she understands the Finance Procedures regarding reimbursements and the employee understands that their reimbursable expense report is to be submitted to the Finance Office within 30 days from either the trip return date or the ending date of an event. If multiple events are scheduled (for example Athletic season), reimbursable expense reports are to be submitted within 30 days following each event.

I understand that if I am requesting a Pre-Travel Advance, it is my responsibility to submit a complete reimbursable expense report with appropriate receipts and approvals to the Accounts Payable Department within 30 days of the trip return date or ending date of the event, but no longer than 45 days of the return date or ending date of the event. I hereby authorize a payroll deduction for the amount advanced if my reimbursable expense report is not approved, submitted and received by the Accounts Payable department within the 45-day period as described above.

Maureen Dunne
 Employee Signature _____ Date _____

Approved by: Frank [Signature] Subsequent account to be charged: 01 - 90 - 00813 - 5502001
 (Immediate Supervisor) (Date) Fund Function Dept. Obj. Code
 (To be filled in by Budget Officer)

Approved by: _____ (Date)
 (Budget Officer) Signature is required if advance is requested.

Approved by: _____ (Date)
 (Vice President) Signature required if total expenses are \$500 or greater.

For travel outside the State of Illinois ONLY

Approved by: _____ (Date)
 (Vice President or Designee)

For travel outside the Continental United States ONLY

Approved by: _____ (Date)
 (President/Board of Trustees)

FOR FINANCE OFFICE USE ONLY:

90% of \$ _____ = \$ _____ 01-00-00000-1309001
 (Amount of Advance) (Finance Office Approval) (Date)

INSTRUCTIONS

- I. Employees requesting to be reimbursed for a College related expense must obtain prior approval by their Supervisor as well as the authorized Budget Officer and their Vice President and President (if applicable) for expenditures of \$100.00 or greater. The Pre-Travel Approval/Advance Form is used for this purpose regardless if the expense is or is not related to travel.
- Complete the form in its entirety. Provide detail in Section A (Professional Meetings or Conferences) OR Section B (other Institutional Business.)
 - If an advance is requested, be sure to mark the appropriate ☐.
 - Travel advance checks/ACH deposits are processed in accordance with (1) the published Accounts Payable check schedule and (2) the scheduled travel date.
 - Airfare, registration fees and lodging deposits will be reimbursed in advance of actual travel when a completed Pre-Travel form and Reimbursable Expense Form is submitted to Accounts Payable. Supporting documentation including an itemization of the charges and proof of payment detailing payment made by the employee must be included.
 - Airfare, registration fees and lodging deposits can be paid directly in advance by submitting a Requisition via Mercury Commerce for PO issuance to the respective vendor.
 - For conference/meeting registration fees, a copy of the registration form showing the date(s) of the conference and fees paid must be attached to the Pre-Travel Approval/Advance Form.
 - Advances not returned to the college or cleared within 45 days of the date of the event will be deducted from the employee's payroll check. Employee has authorized said deduction as attested to the employee's signature on the Pre-Travel Advance Request form.
 - Vehicle rentals require the approval of the budget officer(s) in advance of travel.
 - Overnight stays in the following Illinois counties require approval in advance of travel by the department Vice President: Cook, DeKalb, DuPage, Grundy, Kane, Kendall, Lake, McHenry and Will.
 - No reimbursement for meals or "incidental expenditures" will be made unless an overnight stay is required. Exceptions may apply (for example Forensics or Athletics off-campus events.)
 - For a full day of travel away from home where an overnight stay is required, employee meals and incidental expenses will continue to be reimbursed based on a two tier approach and in accordance with the following criteria:
 - For overnight travel, meals and incidental expenses for the day of departure and the day of return will be limited to 75% of the daily amount allowed by the Internal Revenue Service and communicated by the Finance Office.
 - Receipts for the first or second tier maximum daily limits are not required and therefore do not have to be submitted with the Reimbursable Expense Form. However, all meals and incidental expenses must be itemized by day on the form.
 - Incidental expenses are included in the per diem daily limit. Incidental expenses are tips for porters, baggage carriers, bellhops, and hotel maids; beverages and snacks outside of meals; transportation between places of lodging or businesses and places where meals are obtained.
 - The first tier rate applies to all continental United States locations that are not currently listed at the highest published daily rate for meals and incidental expenses as provided by the Internal Revenue Service. The second tier rate applies to only those locations having the highest published daily rate for meals and incidental expenses in the continental United States. Published second tier locations can be found on Outlook/Public Folders:Information/Administrative Affairs/Financial Affairs & Controller/Mileage/Per Diem Rates.
 - Employee retains pink copy.
 - Remaining copies are submitted to employee's supervisor.
 - Supervisor will have copies approved by Authorized Budget Officer who must provide subsequent GL account to be charged.
Estimated expenses \$500 or greater must be approved by your respective Vice President or Designee.
All out-of-state travel must be approved by your respective Vice President or Designee.
All travel outside the continental United States must be approved by the President/Board of Trustees.
 - Authorized Signer will distribute copies as follows:
 - White — Finance Office-Manager, Cash Disbursements
 - Yellow — Retain in records of Authorized Signator
 - Blue — Return to employee (to submit with Reimbursable Expense Form)
 - Employees will return the blue copy of form with completed reimbursable expense report within guidelines of institutional policy.
 - Airline reservations are to be made through the College Designated Travel Agency. Exceptions must be approved, in advance, by the Vice President, Administrative Affairs. Airline tickets may be purchased with credit card or personal check.
Airline tickets for group travel may be purchased with a Purchase Order.
- II. Employees away from campus on College business with expenses being paid directly by the College (such as use of college owned vehicle, registration fees, airfare, lodging, etc.) should indicate these costs in the "Estimated cost paid direct by College" section of the form. Request vehicle requisition form or vehicle mileage rates from the Purchasing Department. Submit vehicle requisitions to the Purchasing Department directly to secure a reservation.
- III. Employees not away from campus, with estimated reimbursable expenses in excess of \$100.00 are to complete the form as in item I, but write "None" in the space designated for Date or Dates Off Campus.
- IV. Employees away from campus without reimbursable expenses or when reimbursable expenses are estimated at less than \$100.00.
- Complete and sign the form.
 - Remove the employee pink copy and retain for records.
 - Forward remaining copies to employee's supervisor.
 - Supervisor will have copies signed by authorized signer, if approved.
 - Authorized signer will distribute copies as follows:
 - Yellow — Retain in records of Authorized Signator
 - Blue — Return to employee as confirmation of action



Thank you for choosing Spirit Airlines. This notice contains information to be used during your travels. Please review the contents of this document carefully. For your convenience, please print a copy to take with you on your trip.

Please do not reply to this email. The reply email address is used solely for outgoing email documents.

YOUR CONFIRMATION CODE

BJ7WGE

BOOKING DATE Monday, August 05, 2019

Flight

WEDNESDAY, AUGUST 07, 2019

Chicago, IL
Baltimore, MD

TIME	DURATION
8:31 PM	01 h 55 min
11:26 PM	

FLIGHT
968

TERMINAL
3

SATURDAY, AUGUST 10, 2019

Baltimore, MD
Chicago, IL

TIME	DURATION
9:25 PM	02 h 10 min
10:35 PM	

FLIGHT
369

TERMINAL

Please be aware that flight times are subject to change. Notification of schedule changes will be sent to the email address provided at the time of booking.

Do you have TSA Pre✓®? Don't forget to add your Known Traveler Number (KTN) to your reservation [here!](#)

Online check-in begins 24 hours before your flight. It's the easy way to save time and money! Definitely **reconfirm your flight times** on our site on your day of travel - or at any time. It is recommended that you arrive at the airport 2 hours prior to departure time for domestic flights (United

States, Puerto Rico and U.S. Virgin Islands) and at least 3 hours prior to departure time for international flights.

Customer Information

NAME	ASSISTANCE	FREE SPIRIT #
Maureen Dunne	None	

Bags

NAME	CARRY-ON	CHECKED
Maureen Dunne	0 0	0 0

Seats

NAME	SEATS
Maureen Dunne	- -

Contact Information

Maureen Dunne	
US	

Purchase Price

Flight Price	\$370.34
Government's Cut	\$53.24
Total	\$423.58



Holiday Inn

01-07-20

Maureen Dunne	Folio No. : 460329	Cashier No. : 17	Room No. : 320
[REDACTED]	A/R Number :		Arrival : 08-07-19
United States	Group Code :		Departure : 08-10-19
	Company :		Conf. No. : 43314701
	Membership No. : [REDACTED]		Rate Code : IDME0
	Invoice No. :		Page No. : 1 of 1

Date	Description	Charges	Credits
08-07-19	*Accommodation	170.52	
08-07-19	Room Tax	25.49	
08-08-19	Room Service Dinner - Food [REDACTED]	30.96	
08-08-19	*Accommodation	151.52	
08-08-19	Room Tax	22.65	
08-09-19	*Accommodation	142.02	
08-09-19	Room Tax	21.23	
08-10-19	[REDACTED]		564.39
Thank you for staying with us! Qualifying points for this stay will automatically be credited to your account. Please tell us about your stay by writing a review here - www.ihg.com/reviews. We look forward to welcoming you back soon.		Total	564.39
		Balance	0.00

Guest Signature: _____

I have received the goods and / or services in the amount shown heron. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 0269421

Vendor Name: Ms Maureen N. Dunne

Invoice Number: 052720

Invoice Date: 05/27/20

PO Number:

Check Number: 0268301

Check Amount: \$ 1,665.45

Check Date: 06/10/2020

Department ID: 00813

Reviewer Name:

Voucher Number: V0623251

Redaction Type: None

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

From: zerrudom@cod.edu
Sent: Wed May 27 08:01:43 CDT 2020
To: invoicing@cod.edu
CC:
Subject: FW: Reimbursable Expenses for Trustee Maureen Dunne

From: Carrillo, Erin
Sent: Tuesday, May 26, 2020 5:37 PM
To: Zerrudo, Maria <zerrudom@cod.edu>
Subject: Reimbursable Expenses for Trustee Maureen Dunne
Importance: High

Can you please process and pay the attached Reimbursable Expense Form for Trustee Maureen Dunne (Board Item approved on 5/21/20 see attached).

If you have any questions or need any further information, please let me know.



Erin Carrillo
Office of the President
425 Fawell Blvd.
Glen Ellyn, IL 60137
(630) 942-2203
carrilloe42@cod.edu

From: zerrudom@cod.edu
Sent: Wed May 27 14:00:42 CDT 2020
To: invoicing@cod.edu
CC:
Subject: FW: Reimbursable Expenses for Trustee Maureen Dunne

From: Carrillo, Erin
Sent: Wednesday, May 27, 2020 1:59 PM
To: Zerrudo, Maria <zerrudom@cod.edu>
Subject: RE: Reimbursable Expenses for Trustee Maureen Dunne

8s261 Aintree Drive
Naperville, IL 60540

From: Zerrudo, Maria
Sent: Wednesday, May 27, 2020 12:56 PM
To: Carrillo, Erin <carrilloe42@cod.edu>
Subject: FW: Reimbursable Expenses for Trustee Maureen Dunne
Importance: High

Erin,

Please provide Maureen Dunne's address.
Want to be sure it is still the same address in Colleague.

Thanks

Marivic Zerrudo
Accounts Payable Team Leader
College of DuPage
425 Fawell Blvd | SRC 2132 | Glen Ellyn, IL 60137-6599
phone 630-942-2601 | zerrudom@cod.edu


From: Carrillo, Erin
Sent: Tuesday, May 26, 2020 5:37 PM
To: Zerrudo, Maria <zerrudom@cod.edu>
Subject: Reimbursable Expenses for Trustee Maureen Dunne
Importance: High

Can you please process and pay the attached Reimbursable Expense Form for Trustee Maureen Dunne (Board Item approved on 5/21/20 see attached).

If you have any questions or need any further information, please let me know.

Full name of event (no initials): <u>ACCT National Legislative Summit</u>			IMPORTANT: Attach original paid receipts for individual expenses \$15 or greater. The approved Pre-Travel Form is required for any business-related travel; Blue Copy of the Pre-Travel must be attached in those instances. <i>Refer to instructions on reverse side.</i> Attach additional forms if necessary.								
Location (City/State): <u>Washington, DC</u> If applicable, attach a listing of all Guests to include their name, title, company name as well as the meeting agenda.			AUTOMOBILE As of January 1, 2015 the rate for use of a personal vehicle is 57.5¢/mile.		ROOM & TAX (Adjusted to single room rate). Itemize charges by day.		MEALS/INCIDENTALS For more information on meals and incidental expenses, see instructions. Meals/Incidentals must be itemized by day.		OTHER EXPENSES: Includes, but are not limited to, tolls, phone calls, taxi/train/bus fare, registration fees, approved car rental, airfare, etc. Meals/food are not considered "other expense" and are to be itemized under Meals/Incidentals section. Attach original paid receipts for individual expenses totaling \$15.00 or greater.		
DATE	DESCRIPTION/BUSINESS PURPOSE	DAILY MILEAGE	RATE	AMOUNT	LODGING	B'FAST	LUNCH	DINNER	EXPLANATION	AMOUNT	TOTAL
			\$.575								
2/9/20	Uber to Airport								Transport Airport	46.96	46.96
2/9/20	United Airlines								Air Fare	123.40	123.40
2/9/20	Uber from Airport								Transport Hotel	56.15	56.15
2/12/20	Holiday Inn Hotel				401.66						401.66
2/12/20	Uber to Airport								Transport Airport	61.22	61.22
2/12/20	Southwest Airlines								Air Fare	80.97	80.97
2/12/20	Uber from Airport								Transport Home	45.09	45.09
TOTAL					401.66					413.79	\$815.45

AP VERIFIED
 05/27/20 - MARIA ZERRUDO

Maureen Dunne <small>Name (please print)</small>		<i>Maureen Dunne</i> <small>Signature</small>		5/13/20 <small>Date</small>		Total Expense Authorized by Department		\$815.45	
Board of Trustees <small>Department Name</small>		 <small>Budget Officer Approval</small>		5/21/20 <small>Date</small>		Less Pre-Travel Advance Issued by the College		0	
x2203 <small>Employee Colleague ID Number Telephone Extension</small>		Budget Officer Approval		Date		Amount Due Employee		\$815.45	
Budget Officer Approval		Date		Amount Due College (Payment is to accompany expense report; if paying by check, Payee is College of DuPage).					

ACCOUNT NUMBERS FOR REIMBURSABLE EXPENSE					FOR OFFICE USE ONLY:	
FUND	FUNCTION	DEPARTMENT	OBJECT CODE	AMOUNT	Audited By:	
01	90	00813	5503005	\$ 815.45	<i>James Martner</i>	5/14/20
				\$	Audited By:	
				\$	Extensions/Footings Checked:	
				\$	Comments:	
				\$		



College of DuPage

COLLEGE of DuPAGE
REGULAR BOARD MEETING

BOARD APPROVAL

1. SUBJECT

Approval of reimbursement request for Trustee Maureen Dunne.

2. REASON FOR CONSIDERATION

Pursuant to Board Policy No. 5-200, "Trustees may be reimbursed for travel, meal, and lodging expenses incurred in connection with 'official business.'... for the purpose of furthering the College's mission and/or conducting the Board's business"; having received "Approval of the Board by roll call vote at a public meeting ... in advance of attending professional conferences", in accordance with Board Policy 5-195.

3. BACKGROUND INFORMATION

On December 19, 2019, Trustee Maureen Dunne was granted Board approval to attend the Association of Community College Trustees (ACCT), National Legislative Summit in Washington, DC, February 9 - 13, 2020 and for the College of DuPage to reimburse allowable expenses up to \$1,500.00. Trustee Maureen Dunne has submitted expense reimbursement requests, copies of which are submitted with the present resolution. Those requests have been reviewed. The Board is being asked to approve the permitted expenses.

Budget Status

GL Account	FY2019		FY2020	
	YTD Spend	Annual Budget	YTD Spend	Available Balance
01-90-00813-5503005	\$ 2,983	\$ 8,094	\$ 6,594	\$ 1,500
<i>Board of Trustees: Out-of-State Conference Costs</i>				
			FY2020 Request	\$ 815

**YTD Spend equals actuals plus committed as of 5/15/20.*

4. RECOMMENDATION

That the Board of Trustees authorizes the reimbursement to Trustee Maureen Dunne in the following amount for the expense report submitted: \$815.45.

SIGNATURE PAGE

Reimbursable Expenses for Trustee Maureen Dunne

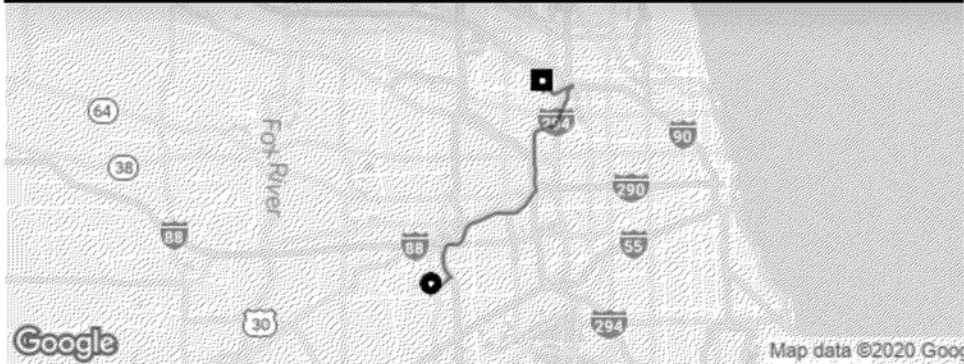
ITEM(S) ON REQUEST:

That the Board of Trustees authorizes the reimbursement to Trustee Maureen Dunne in the following amount for the expense report submitted: \$815.45.


Chairman Napolitano 5/21/20
Date


Secretary Markwell 5/21/20
Date

Trip Details



2/9/20, 4:25 PM

\$41.96

Toyota Corolla ZV16690

+\$5.00

Add to your tip



Chicago, IL 60666, USA



You rated Gregory





Maureen Dunne [REDACTED]

Fw: eTicket Itinerary and Receipt for Confirmation H0YLM9

2 messages

Dunne, Maureen [REDACTED]
[REDACTED]

Wed, Jan 29, 2020 at 10:28 PM

From: United Airlines, Inc. <Receipts@united.com>
Sent: Wednesday, January 8, 2020 8:28 PM
To: Dunne, Maureen
Subject: eTicket Itinerary and Receipt for Confirmation H0YLM9



Wed, Jan 08, 2020

Thank you for choosing United.

A receipt of your purchase is shown below. Please retain this email receipt for your records.

Confirmation Number:

H0YLM9

Flight 1 of 1 UA597

Class: Economy (N)

Sun, Feb 09, 2020

06:30 PM

Chicago, IL, US (ORD)

Sun, Feb 09, 2020

09:30 PM

Baltimore, MD, US (BWI)

Traveler Details

DUNNE/MAUREEN

eTicket number: **0162489469466**

Frequent Flyer: **UA-XXXXX395 Member**

Seats: **ORD-BWI -----**

Purchase Summary

Method of payment:

Date of purchase:

[REDACTED]
Thu, Jan 09, 2020

Airfare:

101.40 USD

U.S. Transportation Tax:

7.60 USD

September 11th Security Fee:	5.60 USD
U.S. Flight Segment Tax:	4.30 USD
U.S. Passenger Facility Charge:	4.50 USD

Total Per Passenger:	123.40 USD
----------------------	------------

Total: **123.40 USD**

Fare Rules

Additional charges may apply for changes in addition to any fare rules listed.

NONREF/NOCHGS/NOCBBG/NOASR

MileagePlus Accrual Details

Maureen Dunne					
Date	Flight	From/To	Award Miles	PQP	PQF
Sun, Feb 09, 2020	597	Chicago, IL, US (ORD) to Baltimore, MD, US (BWI)	510	102	0
MileagePlus accrual totals:			510	102	0

Baggage allowance and charges for this itinerary

Origin and destination for checked baggage	1st bag charge	2nd bag charge	1st bag weight and dimensions	2nd bag weight and dimensions
Sun, Feb 09, 2020 Chicago, IL, US (ORD - O'Hare) to Baltimore, MD, US (BWI)	30 USD	40 USD	50lbs(23kg) - 62in(157cm)	50lbs(23kg) - 62in(157cm)

Disinsection Notice

Certain countries require that the passenger cabins of aircraft be treated with insecticides. For additional information and a list of those countries, please visit the [U.S. Department of Transportation's disinsection website](#).

IMPORTANT CONSUMER NOTICES

Notice of Baggage Liability Limitations - For domestic travel between points within the United States (except for domestic portions of international journeys), United's liability for loss of, damage to, or delay in delivery of a customer's checked baggage is limited to \$3,500 per ticketed customer unless a higher value is declared in advance and additional charges are paid (not applicable to wheelchairs or other assistive devices). For such travel, United assumes no liability for high value, fragile, perishable, or otherwise excluded items; excess valuation may not be declared on certain types of valuable articles. Further information may be obtained from the carrier. For international travel governed by the Warsaw Convention (including the domestic portions of the trip), maximum liability is approximately 640 USD per bag for checked baggage, and 400 USD per passenger for unchecked baggage. For international travel governed by the Montreal Convention (including the domestic portions of the trip), maximum liability is 1,131 SDRs per passenger for baggage, whether checked or unchecked. For baggage lost, delayed, or damaged in connection with domestic travel, United requires that customers provide preliminary notice within 24 hours after arrival of the flight on which the baggage was or was to be transported and submit a written claim within 45 days of the flight. For baggage damaged or delayed in connection with most international travel (including domestic portions of international journeys), the Montreal Convention and United require customers to provide carriers written notice as follows: (a) for damaged baggage, within seven days from the date of receipt of the damaged baggage; (b) for delayed baggage, within 21 days from the date the baggage should have been returned to the customer. Please refer to Rule 28 of United's Contract of Carriage for important information relating to baggage and other limitations of liability.

Notice of Incorporated Terms - Transportation is subject to the terms and conditions of United's Contract of Carriage, which are

Flight 1 of 1 UA597

Class: Economy (N)

Sun, Feb 09, 2020

06:30 PM

Chicago, IL, US (ORD)

Sun, Feb 09, 2020

09:30 PM

Baltimore, MD, US (BWI)

Traveler Details

DUNNE/MAUREEN

eTicket number: **0162489469466**

Seats: **ORD-BWI ----**

Frequent Flyer: **UA-XXXXX395 Member**

Purchase Summary

Method of payment:

Master Card ending in 8563

Date of purchase:

Thu, Jan 09, 2020

Airfare:	101.40 USD
U.S. Transportation Tax:	7.60 USD
September 11th Security Fee:	5.60 USD
U.S. Flight Segment Tax:	4.30 USD
U.S. Passenger Facility Charge:	4.50 USD

Total Per Passenger: **123.40 USD**

Total: 123.40 USD

Fare Rules

Additional charges may apply for changes in addition to any fare rules listed.

NONREF/NOCHGS/NOCBBG/NOASR

MileagePlus Accrual Details

Maureen Dunne					
Date	Flight	From/To	Award Miles	PQP	PQF
Sun, Feb 09, 2020	597	Chicago, IL, US (ORD) to Baltimore, MD, US (BWI)	510	102	0
MileagePlus accrual totals:			510	102	0

Baggage allowance and charges for this itinerary

Origin and destination for checked baggage	1st bag charge	2nd bag charge	1st bag weight and dimensions	2nd bag weight and dimensions
Sun, Feb 09, 2020 Chicago, IL, US (ORD - O'Hare) to Baltimore, MD, US (BWI)	30 USD	40 USD	50lbs(23kg) - 62in(157cm)	50lbs(23kg) - 62in(157cm)

Disinsection Notice

Trip Details



2/9/20, 8:59 PM

Nissan Altima 1CR2599

\$51.15

+\$5.00

Add to your tip

● 7063 Friendship Rd, Baltimore, MD 21240, USA

■ 1501 Rhode Island Ave NW, Washington, DC 2000...



You rated (Rami) Abdelm...





Holiday Inn

05-09-20

Maureen Dunne	Folio No. : 475084	Cashier No. : 7	Room No. : 226
[REDACTED]	A/R Number :		Arrival : 02-09-20
United States	Group Code :		Departure : 02-12-20
	Company :		Conf. No. : 27701174
	Membership No. : [REDACTED] [REDACTED]		Rate Code : IDMEP
	Invoice No. :		Page No. : 1 of 1

Date	Description	Charges	Credits
02-09-20	Deposit Transfer at Check-In		401.66
02-09-20	*Accommodation	95.22	
02-09-20	Room Tax	14.24	
02-10-20	*Accommodation	127.10	
02-10-20	Room Tax	19.00	
02-11-20	*Accommodation	127.10	
02-11-20	Room Tax	19.00	
Thank you for staying with us! Qualifying points for this stay will automatically be credited to your account. Please tell us about your stay by writing a review here - www.ihg.com/reviews. We look forward to welcoming you back soon.		Total	401.66
		Balance	0.00

Guest Signature: _____

I have received the goods and / or services in the amount shown heron. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.

Trip Details



2/12/20, 6:31 PM

\$56.22

Hyundai Sonata XBN7747

+\$5.00

Add to your tip

● 1501 Rhode Island Ave NW, Washington, DC 2000...

■ 5, MD 21240, USA



You rated Charles



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Maureen Dunne [REDACTED]

Fw: Maureen Dunne's 02/12 Chicago (Midway) trip (VEYHR6): Your reservation is confirmed.

2 messages

Dunne, Maureen [REDACTED]

Wed, Jan 29, 2020 at 10:27 PM

To: [REDACTED]

From: Southwest Airlines <southwestairlines@ifly.southwest.com>

Sent: Wednesday, January 8, 2020 8:33 PM

To: Dunne, Maureen

Subject: Maureen Dunne's 02/12 Chicago (Midway) trip (VEYHR6): Your reservation is confirmed.

Here's your itinerary and other important travel information.

[View our mobile site](#) | [View in browser](#)



[Manage Flight](#) | [Flight Status](#) | [My Account](#)



Hi Maureen,

We're looking forward to flying together! It can't come soon enough. Below you'll find your itinerary, important travel information, and trip receipt. See you onboard soon!

FEBRUARY 12

BWI  **MDW**

Baltimore to Chicago (Midway)

Confirmation # **VEYHR6**

Confirmation date: 01/08/2020

PASSENGER

Maureen Dunne

RAPID REWARDS #

[Join](#) or [Log in](#)

TICKET #

5262158370575

EXPIRATION¹

January 8, 2021

EST. POINTS EARNED



Rapid Rewards® points are only estimations.

Your itinerary

Flight: Wednesday, 02/12/2020 Est. Travel Time: 2h 10m [Wanna Get Away®](#)

FLIGHT # 1656	DEPARTS BWI 09:35PM Baltimore		ARRIVES MDW 10:45PM Chicago (Midway)
------------------	--------------------------------------------	-----------------------------------------------------------------------------------	---------------------------------------------------

Payment information

Total cost

Air - VEYHR6

Base Fare	\$	61.93
U.S. Transportation Tax	\$	4.64
U.S. 9/11 Security Fee	\$	5.60
U.S. Flight Segment Tax	\$	4.30
U.S. Passenger Facility Chg	\$	4.50
		<hr/>
Total	\$	80.97

Payment



Payment Amount: \$80.97

Fare Rules: If you decide to make a change to your current itinerary it may result in a fare increase. In the case you're left with travel funds from this confirmation number, you're in luck! We're happy to let you use them towards a future flight for the individual named on the ticket, as long as the new travel is completed by the expiration date.

Your ticket number: 5262158370575

Prepare for takeoff



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30 minutes before your departure:

Arrive at the gate prepared to board.



10 minutes before your departure:

This is the last opportunity to board your flight if you are present in the gate area and have met all check-in requirements.

If you do not plan to travel on your flight: Things happen, we understand! Please let us know at least 10 minutes prior to your flight's scheduled departure if you won't be traveling. If you don't notify us, you may be subject to our [No Show Policy](#).

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5262158370575: NONREF/NONTRANSFERABLE STANDBY REQ UPGRADE TO Y -BG WN BWI WN CHI61.93USD61.93END ZP BWI4.30 XF BWI4.5

ALNUTNF

No Show Policy: you must notify Southwest® at least ten (10) minutes prior to your flight's scheduled departure if you do not plan to travel on your flight. Customers who fail to cancel reservations for a Wanna Get Away® fare segment at least 10 minutes prior to travel and who do not board the flight will be considered a no show, and all remaining unused Wanna Get Away funds will be forfeited. All remaining unused Business Select® and Anytime funds will be converted to reusable travel funds. If you no show your reward travel reservation, the points will be redeposited to the purchaser's Rapid Rewards account. Any taxes and fees associated with your reward travel reservation will be held for future use in the form of reusable travel funds under the name of the traveler(s).

Prohibition on Multiple/Conflicting Reservations: to promote seat availability for our Customers, Southwest prohibits multiple reservations for the same Passenger departing from the same city on the same date, or any multiple reservations containing conflicting or overlapping itineraries (such as departures for the same Customer from multiple cities at the same time). Furthermore, without advance notice to the Passenger or purchaser, Southwest may cancel such reservations, or any other reservations that it believes, in its sole discretion, were made without intent to travel. With the exception of Southwest gift cards, funds from proactively canceled reservations by Southwest will be returned to the original form of payment. Reservations paid for with a Southwest gift card will have the amount applied from the gift card held as travel funds for use by the Customer on a future Southwest Airlines flight.

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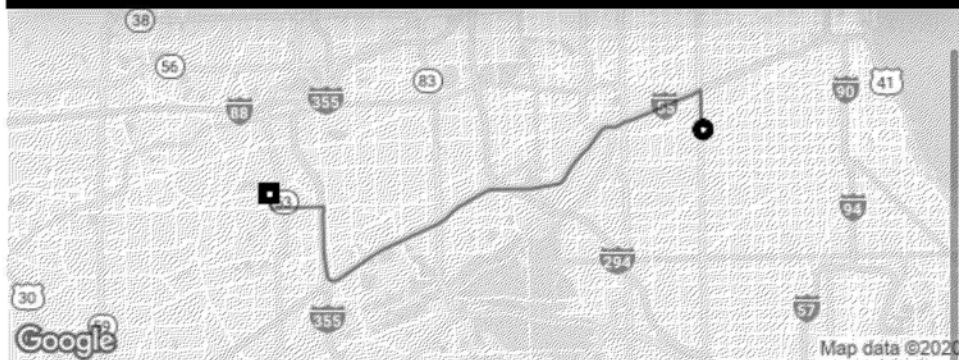
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Mobile app



Trip Details



2/12/20, 11:26 PM

Ford C-Max Hybrid BQ90523

\$40.09

+\$5.00

Add to your tip

● Chicago, IL 60629, USA



You rated Robert





Erin Carrillo
Office of the President
425 Fawell Blvd.
Glen Ellyn, IL 60137
(630) 942-2203
carriloe42@cod.edu



College of DuPage