

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 0782260

Vendor Name: Ms Christine M. Fenne

Invoice Number: 062920

Invoice Date: 06/29/20

PO Number:

Check Number: 0270866

Check Amount: \$ 1,241.29

Check Date: 07/14/2020

Department ID: 00813

Reviewer Name:

Voucher Number: V0633536

Redaction Type: Other

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

Document Below

From: zerrudom@cod.edu
Sent: Mon Jun 29 18:28:31 CDT 2020
To: invoicing@cod.edu
CC:
Subject: FW: Reimbursable Expense Form

From: Carrillo, Erin
Sent: Monday, June 29, 2020 12:54 PM
To: Zerrudo, Maria <zerrudom@cod.edu>
Subject: Reimbursable Expense Form
Importance: High

Attached please find the approved and signed documents for reimbursement to Vice Chairman Christine Fenne's reimbursable expenses.

Please process.

If you have any questions, please contact me.

Thank you.



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

Full name of event (no initials): <u>ACCT National Legislative Summit</u> 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.				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.							
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
2-9-20	AMERICAN AIRLINES ORD-DCA		\$.575		223.90						223.90
2-9-20	MORRISON CLARK INN				185.18						185.18
2-10-20	MORRISON CLARK INN				278.29						278.29
2-11-20	MORRISON CLARK INN				330.02						330.02
2-12-20	AMERICAN AIRLINES DCA-ORD				223.90						223.90
<div style="border: 2px solid blue; padding: 10px; display: inline-block;"> AP VERIFIED 07/06/20 - MARIA ZERRUDO </div>											
TOTAL					1,241.29						\$1,241.29
[Redacted Signature Area]						6-15-2020		Total Expense Authorized by Department		\$1,241.29	
						Date		Less Pre-Travel Advance Issued by the College		0	
						Date		Amount Due Employee		\$1,241.29	
						Date		Amount Due College (Payment is to accompany expense report; if paying by check, Payee is College of DuPage).			
Department Name: <u>x2203</u> Employee Colleague ID Number: _____ Telephone Extension: _____				Budget Officer Approval: _____ Date: _____ Budget Officer Approval: _____ Date: _____							
ACCOUNT NUMBERS FOR REIMBURSABLE EXPENSE						FOR OFFICE USE ONLY:					
FUND	FUNCTION	DEPARTMENT	OBJECT CODE	AMOUNT		Audited By: <u>James Martner</u> Audited By: _____ Extensions/Footings Checked: _____ Comments: _____					
01	90	00813	5503005	\$	1,241.29						
				\$							
				\$							
				\$							



College of DuPage

COLLEGE OF DuPAGE
REGULAR BOARD MEETING

BOARD APPROVAL

1. SUBJECT

Approval for Board Vice Chairman Christine Fenne and Trustee Maureen Dunne, to attend the Association of Community College Trustees, (ACCT), National Legislative Summit in Washington, DC, February 9-12, 2020; and for the College of DuPage to reimburse allowable expenses up to \$1,500.00 per trustee.

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 the organization over the years. In 2016 and 2017 Chairman Napolitano was appointed to the Public Policy and Advocacy Committee. In addition, Chairman Napolitano was invited to present with COD Team at the 2017 ACCT Conference and Trustee Markwell at the 2018 Conference. Chairman Napolitano and Vice Chairman Fenne were invited to present with the COD Team at the 2019 Leadership Congress in San Francisco, CA.

The requested \$1,500.00 will cover the registration for the conference at the early bird rate of \$745.00. (The early bird rate ends December 20, 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	YTD Spend	Annual Budget	YTD Spend	Available Balance
01-90-00813-5503005	\$ 2,983	\$ 6,000	\$ 2,300	\$ 3,700
<i>Board of Trustees: Out-of-State Conference Costs</i>				
FY2020 Request				\$ 3,000

*YTD Spend equals actuals plus committed as of 12/12/19.

4. **RECOMMENDATION**

That the Board of Trustees approves Board Vice Chairman Christine Fenne and Trustee Maureen Dunne, to attend the Association of Community College Trustees, (ACCT), National Legislative Summit in Washington, DC February 9-12, 2020; and for College of DuPage to reimburse allowable expenses up to \$1,500.00 per trustee.

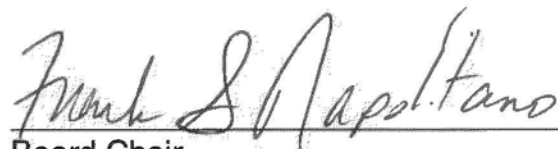
BOARD APPROVAL

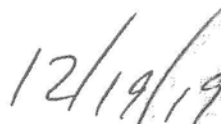
SIGNATURE PAGE

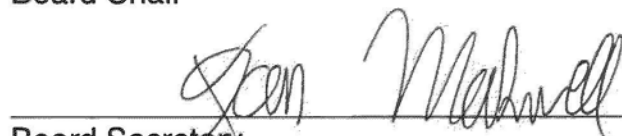
Board Vice Chairman Christine Fenne and Trustee Maureen Dunne attend the Association of Community College Trustees, (ACCT), National Legislative Summit, in Washington, DC February 9-12, 2020

ITEM(S) ON REQUEST

That the Board of Trustees approves Board Vice Chairman Christine Fenne and Trustee Maureen Dunne, to attend the Association of Community College Trustees, (ACCT), National Legislative Summit, Washington, DC February 9-12, 2020; and for College of DuPage to reimburse allowable expenses up to \$1,500.00 per trustee.


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 16, 2020

Name: Christine Fenne Colleague ID#: _____ Extension: x2203 Dept. No.: Board of Trustees

A. Name of Professional Meeting or Conference: ACCT National Legislative Summit
Location: Washington, DC Date(s): February 9 - 13, 2020

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	_____
Lodging (See instruction-d)	<u>\$700.00</u>
Meals (See instruction-f)	_____
Airfare	<u>\$400.00</u>
Other (specify)	<u>\$300.00</u>
TOTAL	<u>\$1,400.00</u>

Estimated expense paid direct by College

(Submit requisitions via Mercury Commerce for PO issuance)

College vehicle	_____
Registration Fee	<u>\$650.00</u>
Lodging	_____
Airfare	_____
Other (specify)	_____
Other (specify)	_____
TOTAL	<u>\$650.00</u>

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 here by 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.

Christine Fenne

6/16/2020

Employee Signature

Date

Approved by: *Mark A. [Signature]* 6/16/2020 Subsequent account to be charged: 01 - 90 - 00813 - 5503006
(Immediate Supervisor) (Date) Fund Function Dept. Obj. Code
(To be filled in by Budget Officer)

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

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

For travel outside the State of Illinois ONLY

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

For travel outside the Continental United States ONLY

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

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

RB properties, inc.

The Henley Park Hotel • State Plaza Hotel • Hotel Lombardy
Morrison-Clark Inn • Washington Plaza

Fenne, Christine

United States

Arrival Date: 02/09/20
Departure Date: 02/12/20

No. In Party: 1
Folio Number: 63J9UP

312

Date	Transaction	Description	Charges	Payment
02/09/20		Promotional Channel Rate	161.10	
02/10/20		Promotional Channel Rate	242.10	
02/11/20		Promotional Channel Rate	287.10	
02/09/20		ROOM SALES TAX	24.08	
02/10/20		ROOM SALES TAX	36.19	
02/11/20		ROOM SALES TAX	42.92	
01/23/20				793.49

Thank you for staying with us!

Subtotals

=====
\$ 793.49 793.49
=====

PAID IN FULL --- THANK YOU!

Thank you for staying with us!

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 or company or association fails to pay for any part of the full amount of these charges. I also agree that all charges contained in this account and any disputes or requests for copies must be made within five days of my departure.

Guest Signature _____

Subject: Your trip confirmation-XGWEPI 09FEB
From: "American Airlines" <no-reply@notify.email.aa.com>
Date: 1/29/20, 10:30 PM
To: "O [REDACTED]"



Hello Christine Fenne!

Issued: Jan 29, 2020

Your trip confirmation and receipt

Record locator: **XGWEPI**

Manage Your Trip

Sunday, February 9, 2020

ORD	→	DCA	Seats: <u>28A</u>
2:12 PM		5:05 PM	Class: Economy (L)
Chicago O'hare		Washington Reagan	Meals: Food For Purchase
American Airlines 999			

Free entertainment with the American app »

Wednesday, February 12, 2020

DCA	→	ORD	Seats: <u>27F</u>
5:55 PM		7:33 PM	Class: Economy (Q)
Washington Reagan		Chicago O'hare	Meals: Food For Purchase

American Airlines 1486

Christine Fenne



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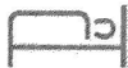
Ticket # 0012112471639

Your trip receipt



Christine Fenne

FARE-USD	\$ 389.77
TAXES AND CARRIER-IMPOSED FEES	\$ 58.03
TICKET TOTAL	\$ 447.80



Hotel offers



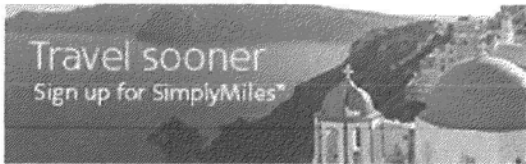
Car rental offers



Buy trip insurance



SuperShuttle



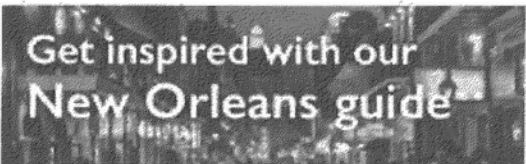
Up to 35% off base rates
+ 1,000 bonus miles

AVIS **Budget**

Miles > Interest
Save with Bask Bank to
earn AAdvantageSM miles

Bask Bank
Optional interest

Bask Bank and BaskMoney are divisions of Texas Capital Bank, N.A. Member FDIC



Get the American Airlines app



Baggage Information

Baggage charges for your itinerary will be governed by American Airlines BAG ALLOWANCE -ORDDCA-No free checked bags/ American Airlines BAG ALLOWANCE -DCAORD-No free checked bags/ American Airlines 1STCHECKED BAG FEE-ORDDCA-USD30.00/ American Airlines /UP TO 50 LB/23 KG AND UP TO 62 LINEAR IN/158 LINEAR CM** 1STCHECKED BAG FEE-DCAORD-USD30.00/ American Airlines /UP TO 50 LB/23 KG AND UP TO 62 LINEAR IN/158 LINEAR CM** 2NDCHECKED BAG FEE-ORDDCA-USD40.00/ American Airlines /UP TO 50 LB/23 KG AND UP TO 62 LINEAR IN/158 LINEAR CM** 2NDCHECKED BAG FEE-DCAORD-USD40.00/ American Airlines /UP TO 50 LB/23 KG AND UP TO 62 LINEAR IN/158 LINEAR CM** **BAG FEES APPLY AT EACH CHECK IN LOCATION ADDITIONAL ALLOWANCES AND/OR DISCOUNTS MAY APPLY

If you have purchased a NON-REFUNDABLE fare the itinerary must be canceled before the ticketed departure time of the first unused coupon or the ticket has NO VALUE.. If the fare allows changes, a fee may be assessed for changes and restrictions may apply.

You have up to 24 hours from the time of ticket purchase to receive a full refund if you booked at least 2 days before departure. You must log in on aa.com or Contact Reservations to cancel. Once cancelled, your refund will be processed automatically. Refund Policy>>.

Some American Airlines check-in counters do not accept cash as a form of payment. For more information, visit our Airport Information page.

SERVICE & SUPPORT ANIMAL REQUIREMENTS

For travel on or after April 1, 2019, the policy for traveling with Emotional Support and Service animals has changed Visit Traveling with Service Animals for more information.



Some everyday products, like e-cigarettes and aerosol spray starch, can be dangerous when transported on the aircraft in carry-on and/or checked baggage. Changes in temperature or pressure can cause some items to leak, generate toxic fumes or start a fire. Carriage of prohibited items may result in fines or in certain cases imprisonment. Please ensure there are no forbidden hazardous materials in your baggage like:

Some Lithium batteries (e.g. spares in checked baggage, batteries over a certain size), Explosives / Fireworks, Strike anywhere matches/ Lighter fluid, Compressed gases / Aerosols Oxygen bottles/ Liquid oxygen, Flammable liquids, Pesticides/ Poison, Corrosive material.

There are special exceptions for small quantities (up to 70 ounces total) of medicinal and toilet articles carried in your luggage, spare lithium batteries for most consumer electronic devices in carry-on baggage, and certain smoking materials carried on your person.

Certain items are required to be carried with you onboard the aircraft. For example, spare lithium batteries for portable electronic devices, cigarette lighters and e-cigarettes must be removed from checked or gate-checked baggage and carried onboard the aircraft. However, e-cigarettes may not be used on-board the aircraft.

Traveling with medical oxygen, liquid oxygen, mobility aids and other assistive devices may require airline pre-approval or be restricted from carriage entirely. Passengers requiring these items should contact the airline operator for information on use of such devices.

To change your reservation, please call 1-800-433-7300 and refer to your record locator.

NOTICE OF INCORPORATED TERMS OF CONTRACT

Air Transportation, whether it is domestic or international (including domestic portions of international journeys), is subject to the individual terms of the transporting air carriers, which are herein incorporated by reference and made part of the contract of carriage. Other carriers on which you may be ticketed may have different conditions of carriage. International air transportation, including the carrier's liability, may also be governed by applicable tariffs on file with the U.S. and other governments and by the Warsaw Convention, as amended, or by the Montreal Convention. Incorporated terms may include, but are not restricted to: 1. Rules and limits on liability for personal injury or death, 2. Rules and limits on liability for baggage, including fragile or perishable goods, and availability of excess valuation charges, 3. Claim restrictions, including time periods in which passengers must file a claim or bring an action against the air carrier, 4. Rights on the air carrier to change terms of the contract, 5. Rules on reconfirmation of reservations, check-in times and refusal to carry, 6. Rights of the air carrier and limits on liability for delay or failure to perform service, including schedule changes, substitution of alternate air carriers or aircraft and rerouting.

You can obtain additional information on items 1 through 6 above at any U.S. location where the transporting air carrier's tickets are sold. You have the right to inspect the full text of each transporting air carrier's terms at its airport and city ticket offices. You also have the right, upon request, to receive (free of charge) the full text of the applicable terms incorporated by reference from each of the transporting air carriers. Information on ordering the full text of each air carrier's terms is available at any U.S. location where the air carrier's tickets are sold or you can click on the Conditions of Carriage link below.

Air transportation on American Airlines and the American Eagle carriers® is subject to American's conditions of carriage.

For more on Canada passenger protection regulations visit aa.com/CanadaPassengers.

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NRID: 6417331556192922295231300