

Information:

Drawer: Accounts Payable - Invoices  
Vendor Number: 1188426  
Vendor Name: Village of Glen Ellyn, Illinois  
Invoice Number: HOTEL TAXMAY23  
Invoice Date: 6/12/2023  
PO Number:  
Check Number: E0095859  
Check Amount: \$ 370.30  
Check Date: 06/20/2023  
Voucher Number: V0789210  
Document Type: AP Invoice

Document Below

## Check Request Form

This form may be used to request check payments only for those items for which the issuance of a purchase order would not be appropriate. Attach supporting documentation (e.g., invoice or agreement). Please refer to Administrative Procedure 10-65, Vendor Payment — Non-Purchase Order.

Date: \_\_\_\_\_ Vendor ID: \_\_\_\_\_ Vendor Name: \_\_\_\_\_

Payee Address: \_\_\_\_\_ Payment Due Date: \_\_\_\_\_

Invoice Number	GL Account number(s) e.g. 01-80-00757-5401001	GL Account Name e.g. Office Supplies	Amount
Total			\$

Check the appropriate box below:

- ☐ We, the undersigned, hereby certify that the goods/services, for which payment is herein requested, have been provided in a satisfactory condition/manner. Consequently, payment is appropriate at this time.
- ☐ We, the undersigned, hereby certify that the goods/services, for which payment is herein requested, have not yet been provided. The first approver indicated below will notify the Accounts Payable Office in writing when the goods/services have been delivered in a satisfactory condition/manner.

Description on Check:

Other Instructions:

### All requests will require the following approvals:

Requester: \_\_\_\_\_ Print Name: \_\_\_\_\_

Budget Officer: \_\_\_\_\_ Print Name: \_\_\_\_\_

Requests \$5,000 and over will require the additional approvals below:

Next Level Supervisor (if applicable): \_\_\_\_\_ Print Name: \_\_\_\_\_

Next Level Supervisor (if applicable): \_\_\_\_\_ Print Name: \_\_\_\_\_

Next Level Supervisor (if applicable): \_\_\_\_\_ Print Name: \_\_\_\_\_

Area Administrator (only required if request is \$5,000 and over): \_\_\_\_\_ Print Name: \_\_\_\_\_

Area Cabinet Officer (only required if request is \$10,000 and over): \_\_\_\_\_ Print Name: \_\_\_\_\_

Board Approval Date (only required if request is \$25,000 and over): \_\_\_\_\_

**Return approved request and all supporting documentation to Accounts Payable (SRC 2132A), [invoicing@cod.edu](mailto:invoicing@cod.edu)**

**Monthly Hotel and Motel Tax Return**  
Due Village of Glen Ellyn



Month and Year May 2023

Name Inn at Water's Edge

Address 425 Fawell Blvd.

City, State, Zip Code Glen Ellyn, IL 60137

Customer ID

Code

Gross Receipts \$7406.00

Rate 5%

Amount of Tax \$370.30

Signature

*Dylan Moua*

Title

Hotel Manager

Date

6/1/23

Make checks payable to:

Village of Glen Ellyn  
535 Duane Street  
Glen Ellyn, IL. 60137

<u>GL Account</u>	<u>Description</u>	<u>May 31 Balance</u>
01-00-00000-2900012	General : Hotel/Motel Tax	(814.66)
	May 2023 State Return	433.46
	May 2023 State Discount	10.90
	May 2023 Village Return	370.30
		<u>814.66</u>
	Post-GL Balance	<u>-</u>

**Notes:**

College Of DuPage				
General Ledger Summary Trial Balance				
Year-to-Date Summary for Period Ending 05/31/2023				
06/12/23				Page: 1
Fiscal Year: 2023				FUND: 01 - Educational
GL Account	Opening Balance	Year-to-Date Debits	Year-to-Date Credits	Closing Balance
01-00-00000-2900012 General : Hotel/Motel Tax	1,462.45-	7,299.33	6,651.54	814.66-
Totals for FUND: 01 - Educational	1,462.45-	7,299.33	6,651.54	814.66-

## May Detail

DATE May Deposits

						Room Count	Room Count	Room Count
	Gross Sales Amount	State Tax Collected	City Tax Collected	Total Taxes	Notes	COD A/R Acct	COD CC	General Public
5/1/2023	\$ 290.00	\$ 17.40	\$ 14.50	\$ 31.90	Ashley			2 Rooms
5/2/2023	\$ -	\$ -	\$ -	\$ -	Ashley			0 Rooms
5/3/2023	\$ -	\$ -	\$ -	\$ -	Ashley			0 Rooms
5/4/2023	\$ -	\$ -	\$ -	\$ -	Marie			0 Rooms
5/5/2023	\$ 520.00	\$ 31.20	\$ 26.00	\$ 57.20	Marie			4 Rooms
5/6/2023	\$ 435.00	\$ 26.10	\$ 21.75	\$ 47.85	Marie			3 Rooms
5/7/2023	\$ 290.00	\$ 17.40	\$ 14.50	\$ 31.90	Ashley			2 Rooms
5/8/2023	\$ -	\$ -	\$ -	\$ -	Ashley			0 Rooms
5/9/2023	\$ -	\$ -	\$ -	\$ -	Ashley			0 Rooms
5/10/2023	\$ 145.00	\$ 8.70	\$ 7.25	\$ 15.95				2 Rooms
5/11/2023	\$ 474.00	\$ 28.44	\$ 23.70	\$ 52.14	Marie			3 Rooms
5/12/2023	\$ 435.00	\$ 26.10	\$ 21.75	\$ 47.85	Marie			3 Rooms
5/13/2023	\$ 580.00	\$ 34.80	\$ 29.00	\$ 63.80	Marie			4 Rooms
5/14/2023	\$ 435.00	\$ 26.10	\$ 21.75	\$ 47.85	Ashley			3 Rooms
5/15/2023	\$ 260.00	\$ 15.60	\$ 13.00	\$ 28.60	Ashley			2 Rooms
5/16/2023	\$ 260.00	\$ 15.60	\$ 13.00	\$ 28.60	Ashley			2 Rooms
5/17/2023	\$ 290.00	\$ 17.40	\$ 14.50	\$ 31.90	Ashley			2 Rooms
5/18/2023	\$ 725.00	\$ 43.50	\$ 36.25	\$ 79.75	Marie			5 Rooms
5/19/2023	\$ 580.00	\$ 34.80	\$ 29.00	\$ 63.80	Marie			4 Rooms
5/20/2023	\$ 580.00	\$ 34.80	\$ 29.00	\$ 63.80	Marie			4 Rooms
5/21/2023	\$ 527.00	\$ 31.62	\$ 26.35	\$ 57.97	Ashley	1 Room		3 Rooms
5/22/2023	\$ -	\$ -	\$ -	\$ -	CLOSED			0 Rooms
5/23/2023	\$ -	\$ -	\$ -	\$ -	Ashley			0 Rooms
5/24/2023	\$ -	\$ -	\$ -	\$ -	Ashley			0 Rooms
5/25/2023	\$ 290.00	\$ 17.40	\$ 14.50	\$ 31.90	Marie			2 Rooms
5/26/2023	\$ 145.00	\$ 8.70	\$ 7.25	\$ 15.95	Marie			1 Room
5/27/2023	\$ 145.00	\$ 8.70	\$ 7.25	\$ 15.95	Marie			1 Room
5/28/2023	\$ -	\$ -	\$ -	\$ -	Ashley			0 Rooms
5/29/2023	\$ -	\$ -	\$ -	\$ -	CLOSED			0 Rooms
5/30/2023	\$ -	\$ -	\$ -	\$ -	Ashley			0 Rooms
				\$ -				
				\$ -				

**Total Receipts**

Subtotals \$ 7,406.00 \$ 444.36 \$ 370.30 \$ 814.66 \$ **8,220.66** :)

**MAY 2023****IL Tax Return Info**

Line 1	\$ 8,220.66	Total Receipts
Line 2	370.30	City Tax
Line 3	-	
Line 4	-	
Line 5	-	
Line 6	370.30	
Line 7	7,850.36	
Line 8	442.76	State Tax Rate .0564 (Listed Rate 6%)
Line 9	-	
Line 10	442.76	
Line 11	9.30	Discount
Line 12	433.46	
IL Tax collected	444.36	
Over(Under)	10.90	Total Discount
Line 13	-	
Line 14	433.46	
Line 15	-	
Line 16	433.46	State Tax

## May Deposits

	Date of Stay	Number of Nights	Rate Per Night	Gross Sales	State Tax	City Tax	Total Amount	Payment Method	01-10-18004-4509030	
1	4/25/2023	4	135.00	540.00	32.40	27.00	599.40	Personal CC		
2	4/28/2023	2	145.00	290.00	17.40	14.50	321.90	Personal CC		
3	4/29/2023	3	145.00	435.00	26.10	21.75	482.85	Personal CC		
4	4/29/2023	3	145.00	435.00	26.10	21.75	482.85	Personal CC		
					Deposit Amount		\$1,887.00			
					Date		5/3/2023			
	Date of Stay	Number of Nights	Rate Per Night	Gross Sales	State Tax	City Tax	Total Amount	Payment Method		
1	5/5/2023	3	145.00	435.00	26.10	21.75	482.85	Personal CC		
2	5/5/2023	1	115.00	115.00	6.90	5.75	127.65	Personal CC		
3	5/5/2023	1	115.00	115.00	6.90	5.75	127.65	Personal CC		
4	5/5/2023	2	145.00	290.00	17.40	14.50	321.90	Personal CC		
5	5/6/2023	2	145.00	290.00	17.40	14.50	321.90	Personal CC		
					Deposit Amount		\$1,381.95			
					Date		5/8/2023			
	Date of Stay	Number of Nights	Rate Per Night	Gross Sales	State Tax	City Tax	Total Amount	Payment Method		
1	5/10/2023	5	145.00	725.00	43.50	36.25	804.75	Personal CC		
2	5/10/2023	1	92.00	92.00	5.52	4.60	102.12	Personal CC		
3	5/11/2023	1	92.00	92.00	5.52	4.60	102.12	Personal CC		
4	5/11/2023	4	145.00	580.00	34.80	29.00	643.80	Personal CC		
5	5/12/2023	3	145.00	435.00	26.10	21.75	482.85	Personal CC		
6	5/13/2023	1	145.00	145.00	8.70	7.25	160.95	Personal CC		
					Deposit Amount		\$2,296.59			
					Date		5/15/2023			
	Date of Stay	Number of Nights	Rate Per Night	Gross Sales	State Tax	City Tax	Total Amount	Payment Method		
1	5/15/2023	7	145.00	1,015.00	60.90	50.75	1,126.65	Personal CC		
2	5/15/2023	2	115.00	230.00	13.80	11.50	255.30	Personal CC		
3	5/17/2023	5	145.00	725.00	43.50	36.25	804.75	Personal CC		
4	5/18/2023	1	145.00	145.00	8.70	7.25	160.95	Personal CC		
5	5/18/2023	1	145.00	145.00	8.70	7.25	160.95	Personal CC		
6	5/18/2023	3	145.00	435.00	26.10	21.75	482.85	Personal CC		
7	5/19/2023	3	145.00	435.00	26.10	21.75	482.85	Personal CC		
8	5/21/2023	1	92.00	92.00	5.52	4.60	102.12	Direct Bill		
					Deposit Amount		\$3,474.30			
					Date		5/22/2023			
	Date of Stay	Number of Nights	Rate Per Night	Gross Sales	State Tax	City Tax	Total Amount	Payment Method		
1	5/25/2023	1	145.00	145.00	8.70	7.25	160.95	Personal CC		
2	5/25/2023	3	145.00	435.00	26.10	21.75	482.85	Personal CC		
					Deposit Amount		\$643.80			
					Date		5/30/2023			
					Total of Deposits at Cashier's Office		\$9,683.64			
					Minus Incidental Charges/Adjustments		-			
					Plus Rooms Paid with Gift Certificate		-	Sales	Hotel Tax	
					Plus May Rooms Under AR Charges		102.12	92.00	10.12	
					Minus April AR Charges Paid in May		-			
					Plus Rooms That Will Carry Over to June Deposits		-	-	-	
					Minus April Rooms That Were In May Deposits		(1,565.10)			
					Total		\$8,220.66			
					Total from Hotel Taxes spreadsheet		8,220.66			

6/12/2023

## Receipt Distribtuion Code Analysis

9:40

Start Date: 5/1/2023  
 Cutoff Date: 5/31/2023  
 Saved List:  
 Distribution Codes:  
 AR Types:  
 Deposit Types:  
 Non-AR Rcpt Codes: CHCH

## Dist by Receipt

Distribution	Person ID	Name	Date	Rcpt No	Type	Type Description	Term	Amount	Session	GL Number
BANK		4.30.23 Inn at WatersEdge	05/04/2023	002171526	CHCH	Inn At Waters Edge		120.00	68612	01_10_00069_5407001
BANK		5.4.23 Daily Deposit 5.3.23	05/04/2023	002171551	CHCH	Inn At Waters Edge		1,700.00	68612	01_10_18004_4509030
BANK		5.4.23 Daily Deposit 5.3.23	05/04/2023	002171551	CHCH	Inn At Waters Edge		187.00	68612	01_00_00000_2900012
						TOTAL:		1,887.00		
BANK		05.08.23 DailyDeposit 5.8.23	05/08/2023	002172416	CHCH	Inn At Waters Edge		1,245.00	68658	01_10_18004_4509030
BANK		05.08.23 DailyDeposit 5.8.23	05/08/2023	002172416	CHCH	Inn At Waters Edge		136.95	68658	01_00_00000_2900012
						TOTAL:		1,381.95		
BANK		Daily Deposit 5.10.23	05/10/2023	002172881	CHCH	Inn At Waters Edge		15.00	68686	01_00_00000_2709003
BANK		05.15.23 Daily Deposit 051523	05/15/2023	002174073	CHCH	Inn At Waters Edge		2,069.00	68751	01_10_18004_4509030
BANK		05.15.23 Daily Deposit 051523	05/15/2023	002174073	CHCH	Inn At Waters Edge		227.59	68751	01_00_00000_2900012
						TOTAL:		2,296.59		
BANK		05.22.23 DailyDeposit 5.22.23	05/22/2023	002181376	CHCH	Inn At Waters Edge		3,130.00	68845	01_10_18004_4509030
BANK		05.22.23 DailyDeposit 5.22.23	05/22/2023	002181376	CHCH	Inn At Waters Edge		344.30	68845	01_00_00000_2900012
						TOTAL:		3,474.30		
BANK		05.30.23 DailyDeposit 5.30.23	05/30/2023	002183670	CHCH	Inn At Waters Edge		580.00	68951	01_10_18004_4509030
BANK		05.30.23 DailyDeposit 5.30.23	05/30/2023	002183670	CHCH	Inn At Waters Edge		63.80	68951	01_00_00000_2900012
						TOTAL:		643.80		
						GRAND TOTAL:		9,683.64		

"Barrios, Isabel" <barriosi142@cod.edu>

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**Check Request - May 2023 Village Hotel Tax.pdf**

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"Barrios, Isabel" <barriosi142@cod.edu>

Mon, Jun 12, 2023 at 08:02 PM UTC

CC:

BCC:

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**1 attachment**

Check Request - May 2023 Village Hotel Tax.pdf