

Information:

Drawer: Accounts Payable - Invoices  
Vendor Number: 1086695  
Vendor Name: ISAC  
Invoice Number: 10/1/2021  
Invoice Date: 9/29/2023  
PO Number:  
Check Number: 0317980  
Check Amount: \$ 11,228.00  
Check Date: 10/11/2023  
Voucher Number: V0803288  
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
<b>Total</b>			<b>\$</b>

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)**

## Check Request Form (*cont.*)

### Processing a Check Request:

To expedite the processing of a check request, or other non-purchase order disbursement, the requesting department should:

1. Verify that the vendor intake process has been completed by the Procurement Office.  
Payment cannot be made to a vendor until this process has been completed.
2. Complete and review this check request form and confirm that all relevant supporting documentation is attached including fully executed contracts, if applicable.
3. Ensure the payee information is complete and includes the vendor's Colleague ID number.
4. Ensure that the general ledger account number is included and correct.
5. Maintain a copy of the approved check request form for department records.
6. Submit the completed check request form to the Accounts Payable Office.

The check request form will be returned to the budget officer if the information is incomplete, not in compliance with College Policy, or if budget is not available.



August 24, 2021

**Due on or before September 30, 2021**

MAP CODE: 032

NISHIA IKEZOE-HEARD  
COLLEGE OF DUPAGE  
425 FAWELL BLVD  
GLEN ELLYN, IL, 60137

Dear Colleague:

As of today's date, our records indicate that your institution has an outstanding amount due to ISAC for the Monetary Award Program (MAP) for the 2020-21 academic year in the amount(s) listed below. **The outstanding amount(s) due to ISAC, with proper documentation, should be returned to ISAC on or before September 30, 2021.**

TOTAL amount due to ISAC - MAP

\$10,005.00

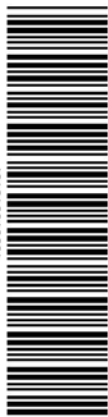
Please do not send refund checks to ISAC without providing the appropriate adjustment data. Once adjustments have been reported to ISAC, all refund checks must be accompanied by a Gift Assistance Programs Check Return Form, and the specific term(s) and program(s) for each refund must be identified. **Please make all checks payable to the Illinois Student Assistance Commission.** The address for checks and the Check Return Form to be sent is:

BFD DIVISION - J10  
ISAC  
1755 Lake Cook Rd  
Deerfield, IL 60015-5209

#### Questions?

If you have any questions, please contact ISAC's School Services Department by calling 866.247.2172 or by sending an email message to [isac.schoolservices@illinois.gov](mailto:isac.schoolservices@illinois.gov).

School Services Department  
Illinois Student Assistance Commission



Last 4 digits					Actual Credit Hours	\$ AMOUNT NEEDED TO BE	
Last Name	First Name	SSN	Academic Year	TERM	Enrolled	RETURNED	REASON
DIAZ-ARMENTA	SARA	5988	2020-2021	2	-	\$ 240.00	NO LONGER ELIG FOR MAP
ALBAYATI	ABDULLAH	1099	2020-2021	2	-	\$ 501.00	Other tuition based aid paid for tuition
ERBER	DEBRA	5393	2020-2021	2	-	\$ 207.00	Other tuition based aid paid for tuition
FATIMA	ALIYA	9979	2020-2021	2	-	\$ 240.00	Other tuition based aid paid for tuition
GILL	LATRICIA	5284	2020-2021	2	-	\$ 480.00	Other tuition based aid paid for tuition
JOHNSON	KELLI	8576	2020-2021	2	-	\$ 380.00	Other tuition based aid paid for tuition
LESLIE	KIMBERLY	0493	2020-2021	2	-	\$ 480.00	Other tuition based aid paid for tuition
FUENTES	BRENDA	3137	2020-2021	2	-	\$ 225.00	NO CHARGES
MIRANDA	ALESSANDRA	5923	2020-2021	2	-	\$ 880.00	NO CHARGES
RABY	JAIME	9541	2020-2021	2	-	\$ 320.00	NO CHARGES
SHARIFF	SAMAN	3801	2020-2021	2	-	\$ 552.00	Scholarship paid for tuition
SULIMAN	SOKA	0737	2020-2021	2	-	\$ 300.00	Scholarship paid for tuition
BEUTELL	CAITLIN	7064	2020-2021	2	-	\$ 1,200.00	Classes not going towards program
WARGO	KELLY	4126	2020-2021	1	-	\$ 240.00	NO CHARGES
MORANO	ALANA	6893	2020-2021	1	-	\$ 1,040.00	Scholarship paid for tuition
BRUNO	LAUREN	3078	2020-2021	1	-	\$ 640.00	Other tuition based aid paid for tuition
CHILDRESS	AZAYLIA	0125	2020-2021	1	-	\$ 960.00	Other tuition based aid paid for tuition
MOHAMED	AMINA	1556	2020-2021	1	-	\$ 1,040.00	VERIFICATION INCOMPLETE
WALDOW	JESSICA	5316	2020-2021	2	-	\$ 80.00	Change in hours
					8	\$	
					<b>TOTAL TO BE RETURNED</b>	\$ 10,005.00	



1755 Lake Cook Road  
Deerfield, IL 60015-5209  
866.247.2172  
isac.schoolservices@illinois.gov

## GIFT ASSISTANCE PROGRAMS REFUND CHECK FORM

Please report the dollar amount refunded for each program/year if submitting a single check with funds for **multiple** programs or academic years.

Mail Refund Checks to: Finance & Accounting Division - J10  
Illinois Student Assistance Commission  
1755 Lake Cook Road  
Deerfield, IL 60015-5209

To ensure refunds are credited to the correct account (both school and/or student) and the appropriate ISAC gift assistance program, please complete the requested information below.

DATE SENT TO ISAC	
SCHOOL NAME	College of DuPage
MAP CODE /ED CODE/IVG CODE	032
PROGRAM(S)	MAP
ACADEMIC YEAR(S)	2020-2021
VOUCHER NUMBER (specific to the above academic year)	
TERM(S)	1 and 2
CHECK NUMBER	
CHECK DOLLAR AMOUNT	\$ 10,005
<b>REASON FOR REFUND</b>	
<input checked="" type="checkbox"/> Returning Amount Due at End of Year: Per ISAC's letter indicating total amount owed.	
<input type="checkbox"/> Current and/or Prior Year Refund: <ul style="list-style-type: none"><li>• Provide the students' names and Social Security numbers (last 4-digits);</li><li>• Indicate actual credit hours enrolled;</li><li>• List dollar amount refunded for each term; and</li><li>• State the institution's reason for the refund.</li></ul>	
<input type="checkbox"/> External Compliance: ISAC's Finance & Accounting Division will forward a copy of the Final Program Review Report to the appropriate internal department.	
<input type="checkbox"/> Other Refund: Provide Explanation	

"Hamler, David" <hamlerd@cod.edu>

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**FW: Amount Due to ISAC**

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"Hamler, David" <hamlerd@cod.edu>

Wed, Oct 6, 2021 at 03:44 PM GMT

CC:

BCC:

Hello!

Attached is a check request for ISAC. Just a reminder that the completed check needs to be handed to either me or Michelle.

Thank you,

**David Hamler**

Accounts Receivable Coordinator

College of DuPage

Temp Phone: 331-218-0568

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**From:** Humphrey, Vera <humphreyv@cod.edu>  
**Sent:** Wednesday, October 6, 2021 9:49 AM  
**To:** Resnick, Michelle <resnickm@cod.edu>  
**Cc:** Hamler, David <hamlerd@cod.edu>  
**Subject:** FW: Amount Due to ISAC

Hi Michelle,

Ellen has signed.

Thank you.

**Vera Humphrey**

**Administrative Assistant to the**

**Vice President of Administrative Affairs**

College of DuPage 425 Fawell Blvd SRC 2130 Glen Ellyn, IL 60137

630-942-4285 (ph) 630-942-2297 (fax)

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**From:** Roberts, Ellen <[roberts@cod.edu](mailto:roberts@cod.edu)>  
**Sent:** Wednesday, October 6, 2021 9:47 AM  
**To:** Humphrey, Vera <[humphreyv@cod.edu](mailto:humphreyv@cod.edu)>  
**Subject:** RE: Amount Due to ISAC



Vera,

Attached please find the signed form.

Thank you,

Ellen

Ellen M. Roberts

Vice President, Administrative Affairs

**College of DuPage**

425 Fawell Blvd.

Glen Ellyn, IL 60137

[roberts@cod.edu](mailto:roberts@cod.edu)

630-942-2218

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**From:** Humphrey, Vera <[humphreyv@cod.edu](mailto:humphreyv@cod.edu)>  
**Sent:** Wednesday, October 6, 2021 9:22 AM  
**To:** Roberts, Ellen <[roberts@cod.edu](mailto:roberts@cod.edu)>  
**Subject:** FW: Amount Due to ISAC

Hi Ellen,

For your approval.

Thank you.

**Vera Humphrey**

**Administrative Assistant to the**

**Vice President of Administrative Affairs**

College of DuPage 425 Fawell Blvd SRC 2130 Glen Ellyn, IL 60137

630-942-4285 (ph) 630-942-2297 (fax)

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**From:** Resnick, Michelle <[resnickm@cod.edu](mailto:resnickm@cod.edu)>  
**Sent:** Wednesday, October 6, 2021 8:42 AM  
**To:** Humphrey, Vera <[humphreyv@cod.edu](mailto:humphreyv@cod.edu)>  
**Cc:** Hamler, David <[hamlerd@cod.edu](mailto:hamlerd@cod.edu)>  
**Subject:** FW: Amount Due to ISAC

Good Morning Vera,

When possible, can you please route this to Ellen for her review and signature?

Please let me know if you have any questions.

Thank you.

**Michelle Resnick**

Manager of Accounts Receivable

College of DuPage

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**From:** Brady, Scott <[bradys310@cod.edu](mailto:bradys310@cod.edu)>  
**Sent:** Tuesday, October 5, 2021 5:01 PM

**To:** Resnick, Michelle <[resnickm@cod.edu](mailto:resnickm@cod.edu)>

**Subject:** RE: Amount Due to ISAC

Here you go. Dave can also sign as your next level supervisor now that he is an Administrator.

**Scott L. Brady, CPA**

**Chief Financial Officer**

**College of DuPage**

425 Fawell Blvd.

SRC 2130L

Glen Ellyn, IL 60137-6599

Direct: 630.942.2219

Email: [bradys310@cod.edu](mailto:bradys310@cod.edu)

**Disclosure Statement:**

*Information in this transmission is intended only for the person(s) to whom it is addressed and may contain privileged and/or confidential information. If you are not the intended recipient, any disclosure, copying or dissemination of the information is unauthorized and you should delete/destroy all copies and notify the sender. No liability is accepted for any unauthorized use of the information contained in this transmission.*

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**From:** Resnick, Michelle <[resnickm@cod.edu](mailto:resnickm@cod.edu)>  
**Sent:** Tuesday, October 5, 2021 3:27 PM  
**To:** Brady, Scott <[bradys310@cod.edu](mailto:bradys310@cod.edu)>  
**Subject:** FW: Amount Due to ISAC

Scott,

Can you please sign the attached?

Please let me know if you have any questions.

Thank you.

**Michelle Resnick**

Manager of Accounts Receivable

College of DuPage

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**From:** Virgilio, David <[virgiliiod@cod.edu](mailto:virgiliiod@cod.edu)>  
**Sent:** Tuesday, October 5, 2021 3:26 PM  
**To:** Resnick, Michelle <[resnickm@cod.edu](mailto:resnickm@cod.edu)>  
**Subject:** RE: Amount Due to ISAC

Here you go!

**David P. Virgilio, C.P.A.**

**Controller – Financial Affairs**

**College of DuPage** – Glen Ellyn, IL

phone 630.942.3028 – fax 630.942.2297

**Check out the Financial Affairs Team Site [Here](#)**

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**From:** Resnick, Michelle <[resnickm@cod.edu](mailto:resnickm@cod.edu)>

**Sent:** Tuesday, October 5, 2021 3:18 PM

**To:** Virgilio, David <[virgiliod@cod.edu](mailto:virgiliod@cod.edu)>

**Subject:** FW: Amount Due to ISAC

Signature, please.

**Michelle Resnick**

Manager of Accounts Receivable

College of DuPage

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**From:** Hamler, David <[hamlerd@cod.edu](mailto:hamlerd@cod.edu)>  
**Sent:** Tuesday, October 5, 2021 3:14 PM  
**To:** Resnick, Michelle <[resnickm@cod.edu](mailto:resnickm@cod.edu)>  
**Subject:** RE: Amount Due to ISAC

Alrighty, this should be good to go. Sorry about that.

Thank you,

**David Hamler**

Accounts Receivable Coordinator

College of DuPage

Temp Phone: 331-218-0568

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**From:** Resnick, Michelle <[resnickm@cod.edu](mailto:resnickm@cod.edu)>  
**Sent:** Friday, October 1, 2021 11:40 AM  
**To:** Hamler, David <[hamlerd@cod.edu](mailto:hamlerd@cod.edu)>  
**Subject:** FW: Amount Due to ISAC

So I believe with this new check request form, you will always need to add the supporting docs to the form before you start completing the actual check request form.

**Michelle Resnick**

Manager of Accounts Receivable

College of DuPage

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**From:** Virgilio, David <[virgiliiod@cod.edu](mailto:virgiliiod@cod.edu)>  
**Sent:** Friday, October 1, 2021 11:38 AM  
**To:** Resnick, Michelle <[resnickm@cod.edu](mailto:resnickm@cod.edu)>  
**Cc:** Hamler, David <[hamlerd@cod.edu](mailto:hamlerd@cod.edu)>  
**Subject:** RE: Amount Due to ISAC

Yep, in the blank check request form (attached) you can type in those fields and sign electronically. I have a feeling that those fields got broken somehow when extra pages were added to the form?

**David P. Virgilio, C.P.A.**

**Controller – Financial Affairs**

**College of DuPage** – Glen Ellyn, IL

phone 630.942.3028 – fax 630.942.2297

**Check out the Financial Affairs Team Site [Here](#)**



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**From:** Resnick, Michelle <[resnickm@cod.edu](mailto:resnickm@cod.edu)>  
**Sent:** Friday, October 1, 2021 11:36 AM  
**To:** Virgilio, David <[virgiliod@cod.edu](mailto:virgiliod@cod.edu)>  
**Cc:** Hamler, David <[hamlerd@cod.edu](mailto:hamlerd@cod.edu)>  
**Subject:** RE: Amount Due to ISAC

To confirm, David should add your name, Scott's name, and Ellen's name like you did in red (but add in black), then sign it and send your way, correct?

**Michelle Resnick**

Manager of Accounts Receivable

College of DuPage

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**From:** Virgilio, David <[virgiliod@cod.edu](mailto:virgiliod@cod.edu)>  
**Sent:** Friday, October 1, 2021 11:30 AM  
**To:** Resnick, Michelle <[resnickm@cod.edu](mailto:resnickm@cod.edu)>  
**Cc:** Hamler, David <[hamlerd@cod.edu](mailto:hamlerd@cod.edu)>  
**Subject:** RE: Amount Due to ISAC

I signed off on it and added Scott & Ellen's names as the next people you need to route it to (Ellen's needed since it is over \$10,000)... is there any way you can re-do it without breaking the electronic signature links?

**David P. Virgilio, C.P.A.**

**Controller – Financial Affairs**

**College of DuPage** – Glen Ellyn, IL

phone 630.942.3028 – fax 630.942.2297

**Check out the Financial Affairs Team Site [Here](#)**

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**From:** Resnick, Michelle <[resnickm@cod.edu](mailto:resnickm@cod.edu)>

**Sent:** Friday, October 1, 2021 11:20 AM

**To:** Virgilio, David <[virgiliod@cod.edu](mailto:virgiliod@cod.edu)>

**Cc:** Hamler, David <[hamlerd@cod.edu](mailto:hamlerd@cod.edu)>

**Subject:** FW: Amount Due to ISAC

Dave – Can you please sign the attached when you get a second?

David – Looks good. When you send this to AP, please also mention in the email that the check needs to be given to you directly.

Please let me know if you have any questions.

Thank you.

**Michelle Resnick**

Manager of Accounts Receivable

College of DuPage

---

**From:** Hamler, David <[hamlerd@cod.edu](mailto:hamlerd@cod.edu)>  
**Sent:** Friday, October 1, 2021 11:14 AM  
**To:** Resnick, Michelle <[resnickm@cod.edu](mailto:resnickm@cod.edu)>  
**Subject:** FW: Amount Due to ISAC

Hello,

Attached is a check request for ISAC for MAP funds per their request. First time using the new check request form. I put 'DO NOT MAIL' instead of their address, and I provided the instruction to give the check to one of us once complete.

Thank you,

**David Hamler**

Accounts Receivable Coordinator

College of DuPage

Temp Phone: 331-218-0568

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**From:** Gutierrez, Juanita <gutierrez@cod.edu>  
**Sent:** Thursday, September 30, 2021 11:30 AM  
**To:** Hamler, David <hamlerd@cod.edu>  
**Subject:** Amount Due to ISAC

David,

Now that 2020/2021 MAP processing has come to an end, our school has an outstanding amount due to ISAC. Attached is the following information that will need to be sent to ISAC:

- Amount Due to ISAC Letter
- ISAC Refund Check Form
- Spreadsheet with details of amount due

How soon are we able to send payment to ISAC? In addition, once check is ready to get sent may you please send a copy back to me of the "ISAC Refund Check Form" with the completed information for date sent to ISAC and check number?

Thanks,

Juanita Gutierrez

College of DuPage

Office of Student Financial Assistance

425 Fawell Blvd

Glen Ellyn, IL 60137

630 942-2730

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**3 attachments**

image002.jpg

MAP Refund Check Request 20-21 10.01.21.pdf

image003.png