

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1484699

Vendor Name: Buffalo Theatre Ensemble Corp.,D/B/A Bu

Invoice Number: BTEREV100923

Invoice Date: 10/10/2023

PO Number:

Check Number: E0097619

Check Amount: \$ 14,775.34

Check Date: 10/18/2023

Voucher Number: V0806509

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

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.

FY23							
BTE	05-60-11101-2709002		10/5/2023				
	Transferred to						
	05-60-11101-2900005						
Transaction Type	Document	Date	Description	Amount			
Actuals	'A000051813'	6/30/2023	Summary for session 69399	(\$408.40)			
Actuals	'A000051811'	6/30/2023	Summary for session 69368	(\$11,292.80)			
Actuals	'A000051736'	6/26/2023	Summary for session 69256	(\$3,441.60)			
Actuals	'A000051646'	6/14/2023	Summary for session 69156	(\$439.00)			
Actuals	'A000051616'	6/12/2023	Summary for session 69117	(\$11,776.50)	4 ACH 1	5/22/23-5/28/23	ACH
Actuals	'A000051601'	6/8/2023	Summary for session 69090	(\$288.00)	5 ACH 1	5/29/23-6/4/23	Cash
Actuals	'A000051502'	5/31/2023	Summary for session 68986	(\$1,971.00)	3 ACH 1	5/15/23-5/21/23	ACH
Actuals	'A000051497'	5/31/2023	Summary for session 68970	(\$288.00)	2 ACH 1	5/22/23-5/28-23	Cash
Actuals	'A000051446'	5/25/2023	Summary for session 68907	(\$891.00)	1 ACH 1	5/8/23-5/14/23	ACH
				(\$30,796.30)			
			10/9/23 ACH 1	\$14,775.34	Rev to BTE		
			10/9/23 Chargeback	\$439.16	CC to MAC		
			Balance	(\$15,581.80)			

10/10/2023

U:\HOME\SHARED\MAC\Business Office\BTE\FY2024\BTE Revenue FY24\10-09-23\GL Detail05_60_11101_27090022023 10-05-23.xlsxGL Detail05_60_11101_2709002202

BTE REVENUE TRACKING										BTEREV100923				
FY24										Payment expected 10/27/23				
	COLLEGE DEPOSIT DATE	COLLEGE DEPOSIT	BO DEPOSIT DATE	BO DEPOSIT	REVENUE				CC CHARGES TO MAC	REVENUE TO BTE	BALANCE	BO DEPOSIT	SESSION NO.	
ACH #1					CASH/CHECKS	CREDIT	CREDIT LESS FEES	DONATION	3%					
	5/25/2023	891.00	05/08/23-05/14/23	891.00		891.00	864.27		26.73			1	68907	FY24
	5/31/2023	288.00	05/22/23-05/28/23	288.00	288.00		-		-			2	68970	FY24
	5/31/2023	1,971.00	05/15/23-05/21/23	1,971.00		1,971.00	1,911.87		59.13			3	68986	FY24
	6/12/2023	11,776.50	05/22/23-05/28/23	11,776.50		11,776.50	11,423.20		353.30			4	69117	FY24
	6/8/2023	288.00	05/29/23-06/04/23	288.00	288.00		-		-			5	69090	FY24
Total Settlement 10/09/23		15,214.50		15,214.50	576.00	14,638.50	14,199.34	-	439.16	14,775.34	15,214.50			
05/08/23 to 06/04/23				15,214.50							15,214.50			

"McGowan, Ellen" <mcgowan@cod.edu>

Check Req BTE Revenue 14,775.34

"McGowan, Ellen" <mcgowan@cod.edu>

Fri, Oct 13, 2023 at 06:40 PM UTC

CC:

BCC:

Please process for the next ACH run.

Thank you.

Ellen McGowan

Business Manager

McAninch Arts Center

College of DuPage

425 Fawell Boulevard

Glen Ellyn, IL 60137

Office 630-942-3009

Cell 630-205-3627

1 attachment

BTE Revenue Return 10-09-23 14775.34 FY24 Check Request Form w docs emdm_MCC.pdf