

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1505858
Vendor Name: Around the Town Entertainment
Invoice Number: TR25-SANTADEP
Invoice Date: 9/3/2024
PO Number:
Check Number: 0329776
Check Amount: \$ 460.00
Check Date: 09/18/2024
Voucher Number: V0846390
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 2.21, Vendor Payment.

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 \$10,000 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 \$10,000 and over): _____ Print Name: _____

Area Cabinet Officer (only required if request is \$25,000 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.

AROUND THE TOWN ENTERTAINMENT LLC

**P.O. Box 6105
Elgin, IL 60121-6105**

Phn # 847-622-8487

E-mail: AroundTheTownEnt@icloud.com

FY25 esm contracts and check
request
05-60-11601-5309004
479 Actor
TR25_NUTCRK

Contract & Invoice

Rep	Today's Date	Invoice #
MAC	4/2/2024	224-049

BILL To and/or SEND TO:
McAninch Arts Ctr - COD Janey Sarther 425 Fawell Blvd. Glen Ellyn, IL 60137 E-mail: sarther@cod.edu

Location of Event & Directions	
McAninch Arts Ctr - COD 425 Fawell Blvd. Glen Ellyn, IL 60137 Visiting in the Lobby before each show. Park in lot Fawell A	
Event	Visit w/Santa

P.O. No.	Contact Name	Emergency #	# of Guests	Ages
4069-71	Janey Sarther	708-574-8797 cell	unlimited	all

Performance Time	Entertainer	Description	Rate	Qty	Amount
ARRIVE		Santa will arrive approx 10 min before his start time.			
Noon-1pm (1hr)	Santa (Loren)	Saturday 12-14-24. Prior to Nutcrackers matinee.	225.00		225.00
Noon-1pm (1hr)	Santa (Jack H.)	Sunday 12-15-24 . Prior to Nutcrackers matinee.	225.00		225.00
4-5pm (1hr)	Santa (Todd N.)	Saturday-Sunday Dec 14-15, 2024 (2days). Prior to Nutcrackers evening show. Discount applied.	400.00		400.00
Gas Surcharge	Parking or Gas (Compens...	\$15/performer/show Gas Surcharge >>>> Please have comfy chair NOT NEAR A LIT FIRE. >>>>Please sign & Email contract ASAP.	15.00	4	60.00

All CHECKS payable to: Around The Town Entertainment LLC. All ZELLE payments call 847-622-8487.

Total \$910.00

Payment Terms	BALANCE DUE 12-9-24	Retainer \$460 DUE 9-1-24
---------------	---------------------	---------------------------

- 1) The starting time shown above may be delayed by 15 minutes due to weather & traffic conditions beyond the entertainer(s) control. If client delays any above performances, contracted time can be extended by delayed time if entertainer(s) is available. If not, then client is responsible for contracted amount(s).
- 2) IF RETAINER &/or SIGNED CONTRACT has NOT been received AFTER 5 days from today, the event date will be released unless otherwise pre-arranged. FULL PAYMENT is DUE 5 business days before event date UNLESS specified above. GRATUITY is optional. A 9% per annum service charge will apply to bills not paid within 30 days from event date. There will also be a \$25 fee for each returned check.
- 3) If the above entertainer(s) is prevented from performing due to illness, accident or other cause beyond reasonable control, the obligation to that performance may be nullified or a replacement act may be found. All attempts will be made to find a replacement in cases such as these.
- 4) NOTE: Provide shelter, tent or shade for all outdoor events. It is our policy to have an adult supervise all kids performances. We DON'T RECOMMEND balloons for children under the age of 3. Advise in writing of any ALLERGIC REACTIONS to peanuts, chocolate, or latex regarding residential entertainment only.
- 5) ADDITIONAL HOURS to those listed above (O.T.) will be charged as follows: 1 Hr @ \$135 & 1/2 Hr @ \$90 (NOT INCLUDING Magician & Variety Shows).
- 6) Unless otherwise prearranged, NO VIDEO/AUDIO /VISUAL taping, in any capacity by customer(s), or any affiliate or their guests, or employee(s) is allowed DURING ANY MAGICIANS STAGE SHOWS. Take as many still pictures that you like.
- 7) Name(s) shown above is provided as an aid to help visualize the Costume Character. This company does not claim to duplicate the trade marked character nor do the costumes duplicate the trade marked character.
- 8) COVID & Variants: We are complying with ALL current safety procedures set by the CDC. Therefore, ALL entertainer(s) & attending guests will adhere to these guidelines as well. As such, entertainer(s) have the right to refuse service to guests who are not adhering to these guidelines.
- 9) CANCELATIONS: This agreement is NON-CANCELABLE (EXCEPT if Governor mandates phase 1-3 regarding Covid/Variants). Failure on the party signing this agreement to fulfill same, shall make party failing to do so liable for amount of agreement.
- 10) The Ancillary Document named "Assumption of the Risk and Waiver of Liability Relating to COVID & Variants" is set forth when "Schedule A" is attached hereto.

Customer Signature
on all page(s)..X

Signed by:

Ellen Roberts

Date 7/29/2024

"TOTAL" amount is shown on last page!

"Schoettle, Kari" <schoettlek@cod.edu>

Around the Town Entertainment check request \$460

"Schoettle, Kari" <schoettlek@cod.edu>

Mon, Sep 9, 2024 at 06:04 PM UTC

CC:

BCC:

Please process. Thank you.

Kari Schoettle

Project Manager

McAninch Arts Center, College of DuPage

630-942-2914 | schoettlek@cod.edu

1 attachment

Around the Town Entertainment check request 460 deposit kscf.pdf