

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1737224

Vendor Name: International Union United Auto Uaw Loc

Invoice Number: CHECK REQUEST

Invoice Date: 9/13/2024

PO Number:

Check Number: 0329817

Check Amount: \$ 388.15

Check Date: 09/18/2024

Voucher Number: V0850303

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.

International Union United Auto AUW Local 2383

PO Box 455
Shelbyville, KY 40066

Dear International Union United Auto AUW Local 2383,

The college will be sending a check for unused scholarship funds for the following student(s):

Name	Social Security Number	Return Code	Term	Amount
Robinson, Samantha	XXX-XX-7740	RSD	2020-2021	\$388.15
Total:				\$388.15

Please review your funds accordingly upon arrival. Please see return code guide below for reason funds are being returned. Checks should be sent out within 2-3 weeks of notice. If you require any additional documentation or need to speak to me, please feel free to contact me.

Thank you.

Daniela Servin-Garcia

Daniela Servin-Garcia
Scholarship Coordinator
Phone: (630) 942 - 2283
Email: servin-garciad@cod.edu
College of DuPage

**Return Code**

W- Student withdrew
RSD- Remaining Scholarship Dollars
DNE – Did not enroll

Student Information

Samantha Robinson - ID#: 1574507

Check Date	Scholarship Name/Donor	Check Amount	Check #
10/9/2019	UAW Local 2383	\$2,000.00	14569
	TOTAL:	\$2,000.00	
Funds Disbursed Date	Semester Paid	Amount Paid	
1/21/2020	Spring 2020	\$1,611.85	
	TOTAL:	\$1,611.85	

Total of payments received:	\$2,000.00
Total of funds paid to student:	\$1,611.85
Difference owed to scholarship donor:	\$388.15

UAW LOCAL 2383 * 02-99
18 VILLAGE PLAZA PMB 323
SHELBYVILLE KY 40065

CITIZENS UNION BANK
beyond expectations
www.cubbank.com

14569

73-162/839

01

CHECK NUMBER

10/09/2019

PAY TO THE
ORDER OF

College of DuPage

\$

**2000.00

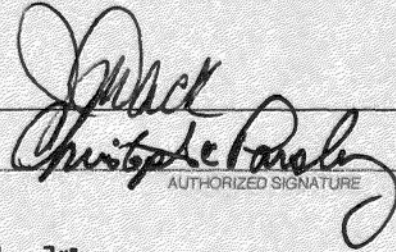
TWO THOUSAND AND 00/100 DOLLARS

DOLLARS

College of DuPage
425 Fawell Blvd.
Glen Ellyn, IL 60137

MEMO

Samantha Robinson ID#1574507


AUTHORIZED SIGNATURE

⑈014569⑈ ⑆083901621⑆ 008 046 2⑈

UAW LOCAL 2383

14569

Description

Scholarship/Tuition Payments

Amount Purpose

2000.00 2019 Scholarship Program

Memo: Samantha Robinson ID#1574507 2019 Scholarship Program

Fund

910-SCHOLARSHIP

College of DuPage

Vendor #

748

Check #

14569

Date

10/09/2019

2000.00

2000.00

"Servin-Garcia, Daniela" <servin-garciad@cod.edu>

Check Request - International Union AUW Local 2383

"Servin-Garcia, Daniela" <servin-garciad@cod.edu>

Mon, Sep 16, 2024 at 04:20 PM UTC

CC:

BCC:

Hello,

Attached is a new check request to process.

Daniela Servin-Garcia

Scholarship Coordinator |Student Financial Assistance

Phone: (630) 942-2283

Email: servin-garciad@cod.edu

We are moving! Please visit financial aid in SCC 123 after December 7th, 2023.

Mail Scholarship Checks to:

College of DuPage

Attn: Daniela Servin-Garcia

Berg Instructional Center (BIC) Room 1A03G

425 Fawell Blvd

Glen Ellyn, IL 60137

2 attachments

Check Request - International Union AUW Local 2383 (Robinson).pdf

image001.png