

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1629020

Vendor Name: Planit Landscape Perspectives LLC

Check Details:

Check Number: E0106400

Check Amount: \$ 143.65

Check Date: 3/18/2025

Invoice Details:

Invoice Number: P0016191

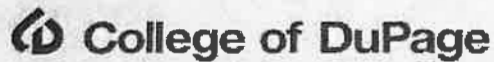
Invoice Date: 3/6/2025

PO Number: P0016191

Voucher Number: V0878402

Document Type: AP Invoice

Document Below



Career Services Center

Illinois Board of Higher Education, Cooperative Work Study

Grant Period: 7/1/2024-8/31/2025

Employer Payment Request

For Employer only:

Employer: PlanIt Landscape Perspectives, LLC


Contact Name: Amanda Arnold

Contact Email: amanda@planit.land

Nature of Work Performed: Landscape Design

Student Name: Katherine Shields

Student Signature: 

Employer Signature: 

| | Check # | Pay Period | Total Hours | Rate | Total | FICA 7.6% | Total |
|----------|---------|--------------------|-------------|----------|-----------|-----------|-----------|
| example: | 245 | 7/1/2024-7/12/2024 | 20 | \$ 15.00 | \$ 300.00 | \$ 22.80 | \$ 322.80 |
| | 5358 | 01/07/250 01/20/25 | 4.50 | \$ 16.00 | \$ 72.00 | \$ 5.47 | \$ 77.47 |
| | 5358 | 01/07/250 01/20/25 | 3.50 | \$ 18.00 | \$ 63.00 | \$ 4.79 | \$ 67.79 |
| | 5364 | 01/21/25-02/03/25 | 1.50 | \$ 16.00 | \$ 24.00 | \$ 1.82 | \$ 25.82 |
| | 5364 | 01/21/25-02/03/25 | 6.00 | \$ 18.00 | \$ 108.00 | \$ 8.21 | \$ 116.21 |
| | | | | | \$ 0.00 | \$ 0.00 | \$ 0.00 |

Grand Total: \$ 287.29

x 50% \$ 143.65

Projected Payment to Employer: **\$ 143.65**

Please provide **paystubs and timesheets** to reflect the reimbursement above. Forms should be sent to internships@cod.edu on a monthly basis with the subject line of: IBHE CWS Grant.

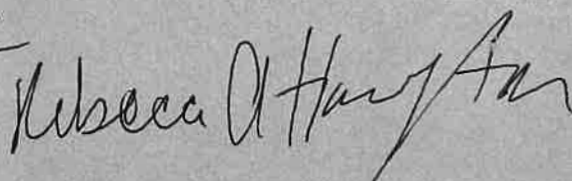
Reimbursement is on a first come, first served basis and are dependent on the availability of limited grant funds. Timely submission of this form is important to ensuring fund availability and reimbursement. Student payroll is not eligible for reimbursement once funds have run out. For questions or concerns, please contact Rebecca Harrington in Career Services at 630-942-2458 or internships@cod.edu.

For Career Services dept only:

Student ID#: 0101156

Quarter: ☐ Q1 ☐ Q2 ☒ Q3 ☐ Q4

Student Program: *Horticulture*

Career Services Program Manager Signature: 

For Grant Accountant only:

Accounts Payable, please pay vendor: **\$143.65**

Grant Accountant Signature:

"Harrington, Rebecca" <riversr@cod.edu>

P0016191

"Harrington, Rebecca" <riversr@cod.edu>

Thu, Mar 6, 2025 at 02:39 PM UTC

CC:

BCC:

P0016191

Rebecca Harrington
Program Manager
College of DuPage Career Services, SSC 3373
riversr@cod.edu

Visit us at cod.edu/careerservices
Listen to [The Career Ready Podcast](#)

1 attachment

IBHE Reimbursement PlanIT Shields_JanForm2025.pdf