

Information:

Drawer: Accounts Payable - Invoices **Vendor Number:** 1784575 **Vendor Name:** Crespo Collective

Check Details:

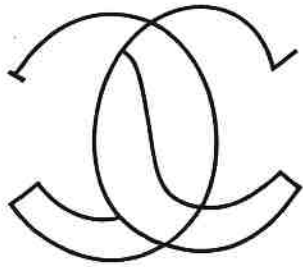
Check Number: E0110326 **Check Amount:** \$ 700.00 **Check Date:** 11/4/2025

Invoice Details:

Invoice Number: 011 **Invoice Date:** 10/28/2025 **PO Number:** P0020112
Voucher Number: V0911044

Document Type: AP Invoice

Document Below



NADINE CRESPO
SPEAKER.WRITER.CONSULTANT

P0020112

INVOICE

#011

BILLED TO: College of Dupage

DATE: 28 October 2025

DESCRIPTION	RATE	HOURS	AMOUNT
Hispanic Heritage- Lecture/Engaging Talk	\$700	1	\$700

TOTAL \$700.00

PAY TO:

Account Name Nadine Crespo-Garcia
7748 Taylor Street
Forest Park, IL 60130



SERVICE AGREEMENT BETWEEN COLLEGE OF DUPAGE AND Crespo Collective

This AGREEMENT ("Agreement") is entered into on October 28, 2025 by and between **College of DuPage, Community College District No. 502, Counties of DuPage, Cook and Will, and State of Illinois ("College")** having its main address at 425 Fawell Blvd., Glen Ellyn IL 60137 and **Crespo Collective ("Contractor")** having an address at , Forest Park, IL 60130.

The College and Contractor desire to enter into this Agreement, by which Contractor shall perform certain services in connection with the project, as described below. In consideration of the performance of services by Contractor and the payment for those services by the College, the parties agree as follows:

1. Scope of Services and Performance

As directed by the College, Contractor will provide Speaker for Hispanic Heritage Month for the College in connection with this Agreement. Contractor will perform the services with the highest professional standards as practiced in a timely manner and in accordance with any project schedule described in the scope of services. The parties agree that time is of the essence with respect to Contractor's performance.

Contractor must promptly notify the College immediately in writing: (i) of any information required from the College so Contractor can complete their services in a timely manner and (ii) of any work requested by the College that is not included in the scope of services provided in this section.

Contractor will perform the services in accordance with all applicable laws, rules, regulations and applicable grants or contracts, including equal employment opportunity and import and export control laws and regulations. All documents, drawings, surveys, and reports (including those in electronic form) prepared by Contractor pursuant to this Agreement are the property of the College. The College will have the right to utilize such documents, drawings, surveys, and reports in the event the College expands the services, corrects any deficiencies, or makes any repairs or renovations to the services.

2. Payment

The College will pay Contractor for services properly performed under this Agreement the amounts set forth as the fees. The fees specified in the costs or itemized time and material rates along with any expenses represent the College's total financial commitment to Contractor for all services and deliverables, applicable taxes, and other obligations under this Agreement. The College is not subject to any sales or use taxes and such taxes will not be included in the fees charged by Contractor. The amount due to Contractor under this Agreement may not exceed \$700.00 without the College's prior written approval.

Contractor will provide invoices in a format acceptable to the College for services rendered directly to the College. Undisputed invoices will be paid within sixty (60) days of receipt of properly submitted invoices, in accordance with the Local Government Prompt Payment Act. In the event of termination by the College as hereinafter provided, Contractor will be paid for services properly rendered prior to termination as provided below. Reimbursement by the College of expenses and expendables incurred by Contractor will be limited to the fees defined in this section.

THIS AGREEMENT IS NOT LEGALLY BINDING UPON THE COLLEGE OF DUPAGE UNLESS AND UNTIL IT IS EXECUTED BY AN AUTHORIZED SIGNATORY OF THE COLLEGE OF DUPAGE. THE COLLEGE OF DUPAGE WILL HONOR NO OTHER APPROVAL OR AUTHORIZATION FOR PERFORMANCE OF OR PAYMENT FOR SERVICES BY THE SERVICE PROVIDER.

Page 1 of 5

3. Term

The term of this Agreement is from October 28, 2025 to October 28, 2025 unless otherwise terminated in accordance with this Agreement. Services may not begin nor payment authorized prior to execution of this Agreement by an authorized signatory of the College of DuPage.

4. Indemnification

To the fullest extent allowed by law, Contractor will indemnify and hold the College, its trustees, officers, agents, employees and any other parties designated by the College (hereinafter collectively called the "Indemnitees") harmless from all losses, claims, liabilities, injuries, damages and expenses, including but not limited to, all attorneys' fees, defense and court costs and expenses, that the Indemnitees may incur arising out of, or occurring in connection with, the acts or omissions by Contractor of its duties and obligations under or pursuant to this Agreement.

5. Insurance

The Contractor shall not commence work under this contract until all insurance required herein is obtained and approved by the Owner. Nor shall the Contractor allow any subcontractor to commence work until all similar insurance required of the subcontractor has been so obtained.

The Contractor shall furnish the College of DuPage with a Certificate of Insurance, with College of DuPage, its trustees, officers, agents, employees, and any other parties designated by COD named as an additional insured for Commercial General and Automobile Liability, showing the minimum coverage indicated below. Insurance companies must have a Best Rating of at least A VI and otherwise be acceptable to the College. Workers' Compensation insurance shall include a waiver of subrogation in favor of the College of DuPage. The College will also be shown as the certificate holder. Further, the Certificate of Insurance shall state that coverage provided is primary to any other coverage available to College of DuPage. An endorsement page showing coverage must accompany the certificate of insurance. The foregoing certificate shall contain a provision that coverage afforded under the policies will not be cancelled or non-renewed until at least sixty (60) days prior written notice has been given to College of DuPage.

TYPE OF INSURANCE

MINIMUM INSURANCE COVERAGE

Combined Single Limit Per Occurrence/Aggregate

Commercial General Liability including:

1. Premises – Operations
2. Explosion, Underground and Collapse Hazard
3. Products/Completed Operations
4. Contractual Insurance
5. Broad Form Property Damage
6. Independent Contractors
7. Bodily Injury

\$1,000,000 / \$2,000,000

Automobile Liability

Owned, Non-owned, or Rented

\$1,000,000 / \$2,000,000

Workers' Compensation and Employers' Liability

As Required by Applicable Laws.

Professional Liability

If Performance Specifications are

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Page 2 of 5

Required by the Contract

6. Termination

The College may terminate this Agreement at any time, in whole or in part, with or without cause, upon written notice to Contractor. In the event this Agreement is terminated pursuant to this paragraph, Contractor will be compensated for services properly rendered through the date of termination, as can be documented to the reasonable satisfaction of the College. The College will have no liability to the Contractor beyond the date of termination. Further, if the Agreement is terminated for cause, the College will be entitled to all direct, indirect, and consequential damages arising from the breach of Agreement prompting the termination.

7. Compliance with Laws

Contractor shall observe and comply with all State of Illinois, local, and federal laws, and the rules of any governing body having jurisdiction over the premises and/or its use, including but not limited to the College of DuPage.

- a. Human Rights Act: To the extent required by law, Contractor shall abide by the Illinois Human Rights Act, 775 ILCS 5/1-101 *et seq.*
- b. Drug Free Workplace: To the extent required by law, Contractor shall abide with the requirements of the Drug Free Workplace Act, 30 ILCS 580.1 *et seq.*
- c. Sexual Harassment Policy: Contractor represents by the signing of this Agreement that it has a written sexual harassment policy that is in accordance with 775 ILCS 5/2-105.
- d. Equal Employment Opportunity: Contractor agrees to comply fully with the Federal Equal Employment Opportunities Act, including 29 C.F.R./Part 1609 "Guidelines on Harassment," the Illinois Human Rights Act, the Americans with Disabilities Act, and all applicable rules and regulations promulgated thereunder and all amendments made thereto, Title VII of the Civil Rights Act of 1964, as amended, and Section 504 of the Rehabilitation Act of 1973, and any additions or amendments, and Contractor represents certifies and agrees that it has implemented a sexual harassment policy pursuant to 775 ILCS 5/2-105 and that no person shall be denied or refused service or other full or equal use of Contractor services, or denied employment opportunities by Contractor on the basis of race, creed, color, religion, sex, national origin or ancestry, age disability unrelated to ability, marital status, or unfavorable discharge from military service.
- e. Fair Employment Practice: Contractor represents it is in compliance with all State and Federal laws regarding Fair Employment Practice as well as all rules and regulations.
- f. Prevailing Wage Act: To the extent required by law, Contractor may not pay less than the prevailing wage as established pursuant to an Act regulating the wages of laborers, mechanics, and other workman employed under Contract for Public Workers 820 ILCS 130/1 *et seq.*
- g. Non-debarment: Contractor certifies that it has not been debarred from public contracts in the State of Illinois for violating either 33E-3 or 33E-4 of the Public Contracts Act, 720 ILCS 5/33E-1 *et seq.*

8. Entire Agreement

This Agreement represents the entire agreement between Contractor and the College and supersedes all prior negotiations or agreements, written or oral. This Agreement may only be amended by written instrument executed by the College and Contractor. In the event of a conflict between this Agreement and a proposal from Contractor or any exhibits hereto, this Agreement shall control.

9. Governing Law and Venue

This Agreement shall be governed by and construed in accordance with the laws of the State of Illinois, without regard to conflict of law provisions. Venue for any disputes arising under or in connection with this

Agreement shall be in the Circuit Court of the Eighteenth Judicial Circuit of the State of Illinois, or in the United States District Court for the Northern District of Illinois, Eastern Division.

10. No Assignment by Contractor

Contractor may not, by operation of law, merger, or otherwise, assign any of its rights, agreements, or obligations under this Agreement without the prior written consent of the College. Any purported assignment by Contractor without the prior written consent of the College shall be null and void and shall not bind the College. Subject to the preceding sentence, all of the terms, agreements, covenants, representations, warranties, and conditions of this Agreement shall be binding upon, and inure to the benefit of and are enforceable by, the parties and their respective successors and assigns.

11. Severability and Non-Waiver

If any provision of this Agreement is found to be unenforceable, the other provisions of this Agreement shall not be affected but shall remain in full force and effect. No waiver by either party of any breach or default by the other party shall be construed to be a waiver of any other breach or default by such other party.

12. Conflicts of Interest

Contractor represents that it, to the best of its knowledge, has no relationship or ownership interest and will not acquire any interest, direct or indirect, in any enterprise, which would conflict in any manner or degree with the performance of the services under this Agreement. Contractor further represents that it has no known and undisclosed familial relationship (as currently defined under applicable College policies) with any College of DuPage Administrator, Employee, Trustee, Committee member, or College of DuPage Foundation Board Member.

Signature Page Follows

Signature Page

This Agreement has been executed the day and year provided below.

CONTRACTOR:

Crespo Collective

M Crespo Garera

Signature

86-1463426

Tax ID or FEIN

10/24/2025

Date:

COLLEGE OF DUPAGE

Ellen M. Roberts

Vice President, Administrative Affairs

Signed by:

Ellen Roberts

Signature

10/24/2025

Date:

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Page 5 of 5

"White, Princess" <whitep144@cod.edu>

Crespo Collective Payment

"White, Princess" <whitep144@cod.edu>

Wed, Oct 29, 2025 at 03:23 PM UTC

CC: Zerrudo, Marivic <zerrudom@cod.edu>

BCC:

Hello,

Can you please process for payment. Services have been completed by Nadine Crespo at Crespo Collective.

Thank you,

Princess White

Administrative Assistant for InterCultural Student Initiatives

College of DuPage

InterCultural Student Initiatives | [425 Fawell Blvd | Glen Ellyn, IL 60137](#) | [630-942-2644](#)

1 attachment

Crespo Collective Payment.pdf

**Request for Taxpayer
Identification Number and Certification**

Go to www.irs.gov/FormW9 for instructions and the latest information.

Give form to the
requester. Do not
send to the IRS.

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.)

Nadine Crespo Garcia

2 Business name/disregarded entity name, if different from above.

Crespo Collective

3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only **one** of the following seven boxes.

☒ Individual/sole proprietor ☐ C corporation ☐ S corporation ☐ Partnership ☐ Trust/estate

☐ LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership)

Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner.

☐ Other (see instructions)

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any)

Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any)

(Applies to accounts maintained outside the United States.)

3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions ☐

5 Address (number, street, and apt. or suite no.). See instructions.

7748 Taylor Street

6 City, state, and ZIP code

Forest Park, IL 60130

7 List account number(s) here (optional)

Requester's name and address (optional)

Print or type.
See Specific Instructions on page 3.

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number

8 6 - 1 4 6 3 4 2 6

or

Employer identification number

8 6 - 1 4 6 3 4 2 6

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

**Sign
Here**

Signature of
U.S. person

Nadine Crespo Garcia

Date

10.01.2025

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form


An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they

From: [Sekerka, Joyce](#)
To: [Zerrudo, Marivic](#)
Subject: RE: Crespo Collective Payment
Date: Wednesday, October 29, 2025 11:14:29 AM
Attachments: [image002.png](#)

Hi Marivic,

Yes, good question. This one is a bit tricky. Since she is an individual/sole proprietor, she can also use a Tax ID number. The Tax ID number must match the name on line 1 of the W-9, which is Nadine Crespo Garcia. So, this should be okay.

For other business entities

- **Line 1 (Legal Name):** Enter the legal business name as it appears on the entity's tax return.
- **Line 2 (Business Name):** You may enter a DBA or alternative business name here.
- **TIN:** In Part I, enter the business's Employer Identification Number (EIN). The EIN is matched to the legal business name on Line 1. 

Thanks,
Joyce

Joyce Sekerka
Accounts Payable Supervisor
College of DuPage
425 Fawell Blvd.
Glen Ellyn, IL 60137-6599
630-942-2293
Email: sekerkaj@cod.edu



From: Zerrudo, Marivic <zerrudom@cod.edu>
Sent: Wednesday, October 29, 2025 10:49 AM
To: Sekerka, Joyce <sekerkaj@cod.edu>
Subject: FW: Crespo Collective Payment

Hi Joyce,

Need you assistance please.

Princess White submitted an invoice in CR under business name Crespo Collective (vendor

1784575), but the invoice is under Nadine Crespo.
She created a PO for this invoice. This is a new vendor.
Shouldn't the name on the invoice show Crespo Collective instead of Nadine Crespo?

Thank you

Marivic Zerrudo
Accounts Payable Specialist
College of DuPage
425 Fawell Blvd | SRC 2132 | Glen Ellyn, IL 60137-6599
phone 630-942-2601 | zerrudom@cod.edu

From: White, Princess <whitep144@cod.edu>
Sent: Wednesday, October 29, 2025 10:35 AM
To: Zerrudo, Marivic <zerrudom@cod.edu>
Subject: RE: Crespo Collective Payment

Nadine is the name of the individual but her llc is Crespo Collective. Vendor number 1784575.

Thanks,

Princess White
Administrative Assistant for InterCultural Student Initiatives
College of DuPage
InterCultural Student Initiatives | [425 Fawell Blvd](#) | [Glen Ellyn, IL 60137](#) | [630-942-2644](#)

From: Zerrudo, Marivic <zerrudom@cod.edu>
Sent: Wednesday, October 29, 2025 10:33 AM
To: White, Princess <whitep144@cod.edu>
Subject: FW: Crespo Collective Payment

Princess,

We are going to have an issue with this because the invoice is under Nadine Crespo Garcia (individual)
P0020112 in under Crespo Collective (vendor)

Can you forward the updated W9?

Thanks

Marivic Zerrudo
Accounts Payable Specialist
College of DuPage
425 Fawell Blvd | SRC 2132 | Glen Ellyn, IL 60137-6599
phone 630-942-2601 | zerrudom@cod.edu

From: White, Princess <whitep144@cod.edu>
Sent: Wednesday, October 29, 2025 10:23 AM
To: Invoicing <invoicing@cod.edu>
Cc: Zerrudo, Marivic <zerrudom@cod.edu>

Subject: Crespo Collective Payment

Hello,

Can you please process for payment. Services have been completed by Nadine Crespo at Crespo Collective.

Thank you,

Princess White

Administrative Assistant for InterCultural Student Initiatives

College of DuPage

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