

Information:

Drawer: Accounts Payable - Invoices **Vendor Number:** 1188426 **Vendor Name:** Village of Glen Ellyn, Illinois

Check Details:

Check Number: E0111162 **Check Amount:** \$ 426.20 **Check Date:** 12/16/2025

Invoice Details:

Invoice Number: HOTELTAXNOV25 **Invoice Date:** 12/10/2025 **PO Number:** NULL **Voucher Number:** V0916221

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

Monthly Hotel and Motel Tax Return
Due Village of Glen Ellyn



Month and Year November 2025

Name Inn at Water's Edge

Address 425 Fawell Blvd.

City, State, Zip Code Glen Ellyn, IL 60137

Customer ID

Code

Gross Receipts \$8524.00

Rate 5%

Amount of Tax \$426.20

Signature

A handwritten signature in cursive script, appearing to read "Dylan Mari", is written over a horizontal line.

Title

Hotel Manager

Date

12/03/25

Make checks payable to:

Village of Glen Ellyn
535 Duane Street
Glen Ellyn, IL. 60137

| GL Account | Description | Nov 30 Balance |
|---------------------|------------------------------|-----------------|
| 01-00-00000-2900012 | General : Hotel/Motel Tax | (937.64) |
| | November 2025 State return | 498.90 |
| | November 2025 State discount | 12.54 |
| | November 2025 Village return | 426.20 |
| | | <u>937.64</u> |
| | Post-GL Balance | <u><u>-</u></u> |

Notes:

| College Of DuPage | | | | |
|---|------------------------|---------------------|----------------------|-----------------|
| General Ledger Summary Trial Balance | | | | |
| Year-to-Date Summary for Period Ending 11/30/2025 | | | | |
| 12/10/25 | | | | Page: 1 |
| Fiscal Year: 2026 | FUND: 01 - Educational | | | |
| GL Account | Opening Balance | Year-to-Date Debits | Year-to-Date Credits | Closing Balance |
| ----- | ----- | ----- | ----- | ----- |
| 01-00-00000-2900012 General : Hotel/Motel Tax | 867.79- | 4,735.17 | 4,805.02 | 937.64- |
| ===== | ===== | ===== | ===== | ===== |
| Totals for FUND: 01 - Educational | 867.79- | 4,735.17 | 4,805.02 | 937.64- |

DATE Nov Deposits

Room Count Room Count Room Count

| | Gross Sales Amount | State Tax Collected | City Tax Collected | Total Taxes | Notes | COD A/R Acct | COD CC | General Public | Cashier's Office Deposit |
|------------|--------------------------|------------------------|-----------------------|----------------|--------|-----------------|--------|-------------------|-----------------------------|
| 11/1/2025 | \$ 620.00 | \$ 37.20 | \$ 31.00 | \$ 68.20 | Nazy | | | 4 Rooms | |
| 11/2/2025 | \$ 465.00 | \$ 27.90 | \$ 23.25 | \$ 51.15 | Ashley | | | 3 Rooms | |
| 11/3/2025 | \$ 465.00 | \$ 27.90 | \$ 23.25 | \$ 51.15 | Ashley | | | 3 Rooms | |
| 11/4/2025 | \$ 620.00 | \$ 37.20 | \$ 31.00 | \$ 68.20 | Ashley | | | 4 Rooms | |
| 11/5/2025 | \$ 155.00 | \$ 9.30 | \$ 7.75 | \$ 17.05 | Ashley | | | 1 Room | |
| 11/6/2025 | \$ 552.00 | \$ 33.12 | \$ 27.60 | \$ 60.72 | Nazy | | | 6 Rooms | |
| 11/7/2025 | \$ 620.00 | \$ 37.20 | \$ 31.00 | \$ 68.20 | Nazy | | | 4 Rooms | |
| 11/8/2025 | \$ 775.00 | \$ 46.50 | \$ 38.75 | \$ 85.25 | Nazy | | | 5 Rooms | |
| 11/9/2025 | \$ 310.00 | \$ 18.60 | \$ 15.50 | \$ 34.10 | Ashley | | | 2 Rooms | |
| 11/10/2025 | \$ 310.00 | \$ 18.60 | \$ 15.50 | \$ 34.10 | Ashley | | | 2 Rooms | |
| 11/11/2025 | \$ - | \$ - | \$ - | \$ - | Ashley | | | 0 Rooms | |
| 11/12/2025 | \$ - | \$ - | \$ - | \$ - | Ashley | | | 0 Rooms | |
| 11/13/2025 | \$ 422.00 | \$ 25.32 | \$ 21.10 | \$ 46.42 | Nazy | | | 3 Rooms | |
| 11/14/2025 | \$ 867.00 | \$ 52.02 | \$ 43.35 | \$ 95.37 | Nazy | | | 6 Rooms | |
| 11/15/2025 | \$ 712.00 | \$ 42.72 | \$ 35.60 | \$ 78.32 | Nazy | | | 5 Rooms | |
| 11/16/2025 | \$ 113.00 | \$ 6.78 | \$ 5.65 | \$ 12.43 | Ashley | | | 1 Room | |
| 11/17/2025 | \$ 113.00 | \$ 6.78 | \$ 5.65 | \$ 12.43 | Ashley | | | 1 Room | |
| 11/18/2025 | \$ - | \$ - | \$ - | \$ - | Ashley | | | 0 Rooms | |
| 11/19/2025 | \$ - | \$ - | \$ - | \$ - | Ashley | | | 0 Rooms | |
| 11/20/2025 | \$ 155.00 | \$ 9.30 | \$ 7.75 | \$ 17.05 | Nazy | | | 1 Room | |
| 11/21/2025 | \$ 320.00 | \$ 19.20 | \$ 16.00 | \$ 35.20 | Nazy | | | 2 Rooms | |
| 11/22/2025 | \$ 155.00 | \$ 9.30 | \$ 7.75 | \$ 17.05 | Nazy | | | 1 Room | |
| 11/23/2025 | \$ 310.00 | \$ 18.60 | \$ 15.50 | \$ 34.10 | Ashley | | | 2 Rooms | |
| 11/24/2025 | \$ 310.00 | \$ 18.60 | \$ 15.50 | \$ 34.10 | Ashley | | | 2 Rooms | |
| 11/25/2025 | \$ 155.00 | \$ 9.30 | \$ 7.75 | \$ 17.05 | Ashley | | | 1 Room | |
| 11/26/2025 | \$ - | \$ - | \$ - | \$ - | CLOSED | | | 0 Rooms | |
| 11/27/2025 | \$ - | \$ - | \$ - | \$ - | CLOSED | | | 0 Rooms | |
| 11/28/2025 | \$ - | \$ - | \$ - | \$ - | CLOSED | | | 0 Rooms | |
| 11/29/2025 | \$ - | \$ - | \$ - | \$ - | CLOSED | | | 0 Rooms | |
| 11/30/2025 | \$ - | \$ - | \$ - | \$ - | CLOSED | | | 0 Rooms | |

Total ReceiptsSubtotals \$ 8,524.00 \$ 511.44 \$ 426.20 \$ 937.64 \$ **9,461.64** :)**NOVEMBER 2025****IL Tax Return Info**

| | | |
|------------------|-------------|---------------------------------------|
| Line 1 | \$ 9,461.64 | Total Receipts |
| Line 2 | 426.20 | City Tax |
| Line 3 | - | |
| Line 4 | - | |
| Line 5 | - | |
| Line 6 | 426.20 | |
| Line 7 | 9,035.44 | |
| Line 8 | 509.60 | State Tax Rate .0564 (Listed Rate 6%) |
| Line 9 | - | |
| Line 10 | 509.60 | |
| Line 11 | 10.70 | Discount |
| Line 12 | 498.90 | |
| IL Tax collected | 511.44 | |
| Over(Under) | 12.54 | Total Discount |
| Line 13 | - | |
| Line 14 | 498.90 | |
| Line 15 | - | |
| Line 16 | 498.90 | State Tax |

Nov Deposits

| | | | | | | | | | | | |
|----|--------------|------------------|----------------|-------------|---|----------|--------------|------------------|---------------------|--|--|
| | Date of Stay | Number of Nights | Rate Per Night | Gross Sales | State Tax | City Tax | Total Amount | Payment Method | 01-10-18004-4509030 | | |
| 1 | 10/12/2025 | 2 | 155.00 | 310.00 | 18.60 | 15.50 | 344.10 | Personal CC | | | |
| 2 | 10/29/2025 | 5 | 155.00 | 775.00 | 46.50 | 38.75 | 860.25 | Personal CC | | | |
| 3 | 10/29/2025 | 3 | 155.00 | 465.00 | 27.90 | 23.25 | 516.15 | Personal CC | | | |
| 4 | 11/1/2025 | 1 | 155.00 | 155.00 | 9.30 | 7.75 | 172.05 | Personal CC | | | |
| 5 | 11/1/2025 | 1 | 155.00 | 155.00 | 9.30 | 7.75 | 172.05 | Personal CC | | | |
| 6 | 11/1/2025 | 1 | 155.00 | 155.00 | 9.30 | 7.75 | 172.05 | Personal CC | | | |
| | | | | | Deposit Amount | | \$2,236.65 | | | | |
| | | | | | Date | | 11/4/2025 | | | | |
| | | | | | | | | | | | |
| | Date of Stay | Number of Nights | Rate Per Night | Gross Sales | State Tax | City Tax | Total Amount | Payment Method | | | |
| 1 | 11/2/2025 | 3 | 155.00 | 465.00 | 27.90 | 23.25 | 516.15 | Personal CC | | | |
| 2 | 11/2/2025 | 3 | 155.00 | 465.00 | 27.90 | 23.25 | 516.15 | Personal CC | | | |
| 3 | 11/3/2025 | 2 | 155.00 | 310.00 | 18.60 | 15.50 | 344.10 | Personal CC | | | |
| 4 | 11/4/2025 | 2 | 155.00 | 310.00 | 18.60 | 15.50 | 344.10 | Personal CC | | | |
| 5 | 11/6/2025 | 1 | 92.00 | 92.00 | 5.52 | 4.60 | 102.12 | Direct Bill | | | |
| 6 | 11/6/2025 | 1 | 92.00 | 92.00 | 5.52 | 4.60 | 102.12 | Direct Bill | | | |
| 7 | 11/6/2025 | 1 | 92.00 | 92.00 | 5.52 | 4.60 | 102.12 | Direct Bill | | | |
| 8 | 11/6/2025 | 1 | 92.00 | 92.00 | 5.52 | 4.60 | 102.12 | Direct Bill | | | |
| 9 | 11/6/2025 | 1 | 92.00 | 92.00 | 5.52 | 4.60 | 102.12 | Direct Bill | | | |
| 10 | 11/6/2025 | 1 | 92.00 | 92.00 | 5.52 | 4.60 | 102.12 | Direct Bill | | | |
| 11 | 11/7/2025 | 2 | 155.00 | 310.00 | 18.60 | 15.50 | 344.10 | Personal CC | | | |
| 12 | 11/7/2025 | 2 | 155.00 | 310.00 | 18.60 | 15.50 | 344.10 | Personal CC | | | |
| 13 | 11/8/2025 | 1 | 155.00 | 155.00 | 9.30 | 7.75 | 172.05 | Gift Certificate | | | |
| | | | | | Deposit Amount | | \$2,408.70 | | | | |
| | | | | | Date | | 11/10/2025 | | | | |
| | | | | | | | | | | | |
| | Date of Stay | Number of Nights | Rate Per Night | Gross Sales | State Tax | City Tax | Total Amount | Payment Method | | | |
| 1 | 11/7/2025 | 4 | 155.00 | 620.00 | 37.20 | 31.00 | 688.20 | Personal CC | | | |
| 2 | 11/7/2025 | 4 | 155.00 | 620.00 | 37.20 | 31.00 | 688.20 | Personal CC | | | |
| 3 | 11/13/2025 | 3 | 92.00 | 276.00 | 16.56 | 13.80 | 306.36 | Personal CC | | | |
| 4 | 11/13/2025 | 1 | 175.00 | 175.00 | 10.50 | 8.75 | 194.25 | Personal CC | | | |
| | | 2 | 155.00 | 310.00 | 18.60 | 15.50 | 344.10 | Personal CC | | | |
| 5 | 11/13/2025 | 3 | 155.00 | 465.00 | 27.90 | 23.25 | 516.15 | Personal CC | | | |
| 6 | 11/14/2025 | 1 | 155.00 | 155.00 | 9.30 | 7.75 | 172.05 | Personal CC | | | |
| 7 | 11/14/2025 | 2 | 155.00 | 310.00 | 18.60 | 15.50 | 344.10 | Personal CC | | | |
| 8 | 11/14/2025 | 2 | 155.00 | 310.00 | 18.60 | 15.50 | 344.10 | Personal CC | | | |
| 9 | 11/16/2025 | 2 | 113.00 | 226.00 | 13.56 | 11.30 | 250.86 | Personal CC | | | |
| 10 | 11/20/2025 | 1 | 155.00 | 155.00 | 9.30 | 7.75 | 172.05 | Personal CC | | | |
| | | | | | Deposit Amount | | \$4,020.42 | | | | |
| | | | | | Date | | 11/21/2025 | | | | |
| | | | | | | | | | | | |
| | Date of Stay | Number of Nights | Rate Per Night | Gross Sales | State Tax | City Tax | Total Amount | Payment Method | | | |
| 1 | 11/21/2025 | 5 | 155.00 | 775.00 | 46.50 | 38.75 | 860.25 | Personal CC | | | |
| 2 | 11/21/2025 | 1 | 165.00 | 165.00 | 9.90 | 8.25 | 183.15 | Personal CC | | | |
| 3 | 11/23/2025 | 2 | 155.00 | 310.00 | 18.60 | 15.50 | 344.10 | Personal CC | | | |
| | | | | | Deposit Amount | | \$1,387.50 | | | | |
| | | | | | Date | | 11/26/2025 | | | | |
| | | | | | | | | | | | |
| | | | | | Total of Deposits at Cashier's Office | | \$10,053.27 | | | | |
| | | | | | Minus Incidental Charges/Adjustments | | - | | | | |
| | | | | | Plus Rooms Paid with Gift Certificate | | 172.05 | Sales | Hotel Tax | | |
| | | | | | Plus November Rooms Under AR Charges | | 612.72 | 552.00 | 60.72 | | |
| | | | | | Minus October AR Charges Paid in November | | - | | | | |
| | | | | | Plus Rooms That Will Carry Over to December D | | - | - | - | | |
| | | | | | Minus October Rooms That Were In November D | | (1,376.40) | | | | |
| | | | | | | | | | | | |
| | | | | | | | Total | \$9,461.64 | | | |
| | | | | | Total from Hotel Taxes spreadsheet | | 9,461.64 | | | | |

CODE: BANK Thank You for Your Payment

| ID | Name | Date | Receipt No | AR Type/Dep | Type/Non-AR | Receipt Code | Amount |
|----|------------------------------|----------|------------|-------------|--------------------|-----------------------|-----------|
| | 11.04.25 Daily Deposit | 11/04/25 | 002486357 | CHCH | Inn At Waters Edge | | 2,236.65 |
| | 11.10.25 Daily Deposit | 11/10/25 | 002487381 | CHCH | Inn At Waters Edge | | 2,580.75 |
| | 11.10.25 Daily Deposit | 11/10/25 | 002487381 | CHCH | Inn At Waters Edge | | 172.05- |
| | 11.21.25 Taxabl Sales & Serv | 11/21/25 | 002495953 | CHCH | Inn At Waters Edge | | 4,020.42 |
| | Daily Deposit 11.26.25 | 11/26/25 | 002497008 | CHCH | Inn At Waters Edge | | 1,387.50 |
| | | | | | | Receipt Tender Total: | 10,053.27 |

"Barrios, Isabel" <barriosi142@cod.edu>

Check Request - November 2025 Village Hotel Tax.pdf

"Barrios, Isabel" <barriosi142@cod.edu>

Thu, Dec 11, 2025 at 06:06 PM UTC

CC:

BCC:

1 attachment

Check Request - November 2025 Village Hotel Tax.pdf