

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1180530

Vendor Name: SURS-State Univ Retirement Sys

Invoice Number: 891154998

Invoice Date: 12/22/17

PO Number:

Check Number: E0064846

Check Amount: \$ 2,096.11

Check Date: 01/10/2018

Department ID: 00835

Reviewer Name:

Voucher Number: V0490546

Redaction Type: Other

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

College of DuPage - Accounts Payable
Check Request Form
revised 3/27/17

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 Vendor Payment - Check Request Procedure No. 10-65

Date: 12/22/2017
Vendor ID: 1180530

Invoice Number	P.O. Number/ Req. Number	Fund	Func.	Dept.	Object	Object Descip.	Amount
891154998	n/a	01	90	00835	5209006	SURS 6% Rule Payments	\$ 1,295.49

Grand Total \$ 1,295.49

--- \$1,000 and Greater: Approval of Division Vice President Required ---

Check the appropriate box below and sign.

- ☐ 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.

AP VERIFIED

01/05/18 - MARIA ZERRUDO

Payee Name: SURS (ACH)

Other
Instructions:

Payee Address: PO Box 92424, Chicago, IL 60675-2424

Description on Check:

Over 6% for

Approvals:

Prepared By: Teresa Dietz

Approved By:

Date:

Signature:

Signature:

11/4/18

Payment Due:

2/27/2018

Approved By:

Date:

Board Approved Date:

Signature:

1/5/18

Approved By Division VP:

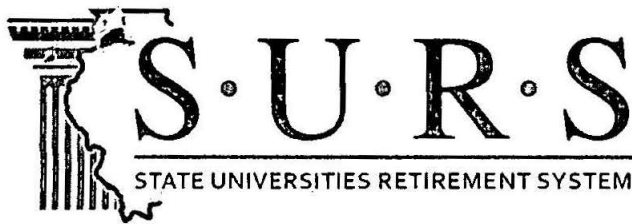
Date:

Signature:

Return Approved Request and All Supporting Documents to: Accounts Payable (SRC 2132 A), acctpay@cod.edu

01.5.1

0.034



RECEIVED

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www.surs.org

DEC 15 2017

December 11, 2017

HUMAN RESOURCES

Ms. Teresa Dietz
College of DuPage
425 Fawell Blvd
Glen Ellyn, IL 60137-6599

Re: 6% Employer Bill
Richard Meiresonne (#1053480)

Dear Ms. Dietz:

Based on information provided by the College, the State Universities Retirement System (SURS) has revised [REDACTED] retirement claim and subsequently, the 6% employer bill. The revised employer amount due is **\$1,295.49**. Please remit your payment by 2/27/18. If payment is not received by that date, interest may be charged at the prescribed rate, compounded annually until full payment is received.

Within 35 days after the issuance of this decision, you may request further review by the Executive Committee of the SURS Board of Trustees. The Executive Committee's review will be based on this decision, as well as the previously submitted application, affidavits and documents. The Executive Committee will render one of the following decisions with respect to the final decision of the administrative staff: affirmation, reversal or remand of the case to the administrative staff for further consideration. Remand of the case to the administrative staff shall not be considered a final decision of the Executive Committee. A decision by the Executive Committee either reversing or affirming the decision of the administrative staff shall constitute a final administrative decision for purpose of review under the Administrative Review Law.

Sincerely yours,

Angela Lieb
Director of Member Services

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1180530

Vendor Name: SURS-State Univ Retirement Sys

Invoice Number: 891154970

Invoice Date: 10/04/17

PO Number:

Check Number: E0064846

Check Amount: \$ 2,096.11

Check Date: 01/10/2018

Department ID: 00835

Reviewer Name:

Voucher Number: V0490554

Redaction Type: Other

Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

College of DuPage - Accounts Payable
Check Request Form
revised 3/27/17

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 Vendor Payment - Check Request Procedure No. 10-65

Date: 10/4/2017
Vendor ID: 1180530

Invoice Number	P.O. Number/ Req. Number	Fund	Func.	Dept.	Object	Object Descrip.	Amount
891154970	n/a	01	90	00835	5209006	SURS 6% Rule Payments	\$ 800.62

Grand Total

\$ 800.62

AP VERIFIED

Check the appropriate box below and sign.

☐ 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.

Payee Name: SURS (ACH)

Other
Instructions:

Payee Address: PO Box 92424, Chicago, IL 60675-2424

Description on Check:

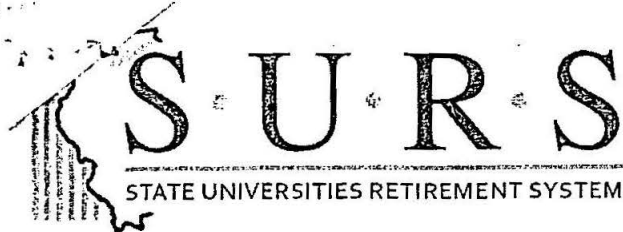
Over 6% for Francis Marrocco ID 1129695 AR Key 891154970, Employer ID 54

Approvals:

Prepared By: Teresa Dietz
Signature: *Teresa Dietz*
Payment Due: upon receipt
Board Approved Date: _____

Approved By: *Mr. Pate* Date: 10/13
Signature: *[Signature]*
Approved By: _____ Date: _____
Signature: _____
Approved By Division VP: _____ Date: _____

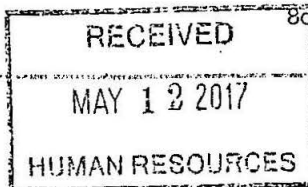
Return Approved Request and All Supporting Documents to: Accounts Payable (SRC 2132 A), acctpay@cod.edu



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May 10, 2017

Ms. Teresa Norris
College of DuPage
425 Fawell Blvd
Glen Ellyn, IL 60137-6599

RE: Francis Marrocco
Member ID #: 1129695
Employer ID #: 54
AR Key #: 891154970

Dear Ms. Norris:

Pursuant to the passage of PA 94-0004, if a participant's earnings for any academic year used to determine their final rate of earnings exceeds the amount of their earnings for the previous year by more than 6%, the State Universities Retirement System is required to bill the employer for the present value of the increase of their benefits.

According to our records, the following member had an increase during their FRE period that was more than 6%.

Name: Francis Marrocco	Campus: COD
SURS Member ID#: 1129695	S.S.#: xxx-xx-8222
Date of birth: 05-01-1951	Retirement Date: 11-01-2016

Academic Year of Increase:	2008
Academic Year Earnings:	\$10,080.00
Prior Academic Year:	2007
Prior Academic Year Earnings:	\$9,972.00

Difference in Monthly Annuity:	\$4.35
Actuarial Factor:	184.0504
Employer Cost:	\$800.62

This amount may be paid in a lump sum payment within 90 days of the date of this bill. If payment is not received (postmarked) by 08-08-2017, interest may be charged at the prescribed rate, compounded annually until payment is received. Payments must be concluded within 3 years after your receipt of this bill.

If you, as the employer, dispute the amount of the bill, you may file a request for recalculation within 30 days of the date of this bill. The request must be submitted on the enclosed application, mailed to SURS and postmarked by 06-09-2017. The application must specify the grounds of the dispute and should include true and correct copies of any pertinent supporting documentation. Original documents should be submitted. No facsimiles or emails will be accepted.

All aspects of administration of the State Universities Retirement System (SURS), including but not limited to benefit calculation and payment, must comply with state and federal law. No employee of SURS has the authority to bind the System to take action contrary to law, even in the event of misstatement of fact or law. Furthermore, while this letter states SURS's current understanding of the law, this could change as a result of court opinions, statutory changes, or other matters (e.g., Attorney General opinions). Accordingly, SURS is required under law to correct any mistake in benefit amount, even after payments have begun. Use of any information from this letter, form, or any other document provided by SURS is for general information only and does not represent personal tax or legal advice either express or implied. You must seek professional legal or tax advice for personal income tax questions and other legal assistance.