

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 0628903

Vendor Name: Mr Nathan R. Loll

Invoice Number: 042818B

Invoice Date: 04/20/18

PO Number:

Check Number: 0235193

Check Amount: \$ 630.00

Check Date: 04/24/2018

Department ID: 00825

Reviewer Name:

Voucher Number: V0509992

Redaction Type: FERPA

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

Document Below

V0501719

RECEIVED

EM-VALR 030818

College of DuPage FEB 22 2018

Human Resources

HUMAN RESOURCES

Please refer to the "Concur Professional Development Procedure" in the Forms Library to complete your request/expense.

Raul Valladares

EMPLOYEE NAME

0756515

COLLEAGUE ID #

Police

DEPARTMENT

630-942-2000

PHONE EXT.

2/5/2018

DATE OF REQUEST

Professional/Educational Development
Tuition ReimbursementCheck One: Classified ☐ Managerial ☐ FOP ☒ Union 399 ☐

Board policy has established a maximum amount of reimbursement per fiscal year. Each fiscal year begins July 1 and ends June 30 and is dependent upon course completion date.

Eligible after six months' probation.

This form must be completed and signed by the appropriate supervisor and department authorized budget signatory before enrolling in the class, workshop or other activity.

Please attach copy of completed registration form (circle amount requesting).

College/University/Seminar Sponsor
NEMRT

Date class begins/Date class ends

1/22/2018

/1/23/2018

Is course job related? ☒ Yes ☐ No

Describe how course is job related:

Assist in future investigations

Is this a wellness course? ☐ Yes ☒ No
(Maximum amount for FY \$240.00)Is course part of a degree program? ☐ Yes ☒ No

Address (if requesting a Pre-Payment)

Name of Course/s

Advanced Cyber Crimes

Are You Requesting: (check one)

Enter Amount:

Needed to Complete Process:

☒ Reimbursement for conference/seminar/class \$ 135.00☐ Required Class Materials \$☐ †Pre-payment for COD credit & non-credit class/conference/seminar/class (>\$50) \$☐ Travel up to \$600 (classified and managerial only) \$☐ COD Health Club* \$☐ #Non-COD Health Club/Non-COD Fitness/Wellness classes* including Weight Watchers \$

Proof of completion and proof of payment

Proof of payment

Proof of completion

Proof of completion and proof of payment

Proof of completion and proof of payment, if applicable

*No Pre-Payments #These are taxable to the employee

†When requesting a pre-payment, attach a registration form or invoice to this form. If using Concur, please contact Accounts Payable for payment. If I receive an advance, I understand I must produce evidence of satisfactory completion of the course or seminar within 60 days. Failure to do this will result in the cost of the course or seminar being deducted from my paycheck. (Initial here)

REQUIRED ☐ Approved

SUPERVISOR'S SIGNATURE

DATE

DEPARTMENT'S AUTHORIZED BUDGET SIGNATURE

DATE

COMPENSATION SPECIALIST

HUMAN RESOURCES OFFICE USE ONLY

Amount of Payment: \$ 135.00

Account #01-90-00835-52090-17 FY 18

Date request sent to Accounts Payable: 3/8/18

Date request approved:

Date expense approved:

HR-18-2327(1/1/16)

SEND COMPLETED FORM WITH PROOF OF COMPLETION AND PROOF OF PAYMENT (if applicable) TO HUMAN RESOURCES



N E M R T

North East Multi-Regional Training, Inc.

355 Smoke Tree Plaza, North Aurora, Illinois 60542
Office: (630) 896-8860 Fax: (630) 896-4422
Website Address: www.nemrt.com



Teresa Cascarano
College Of DuPage Police Department
425 Fawell Blvd, HEC 1040
Glen Ellyn, IL 60137-6599

Date: 1/30/2018

Invoice #: 230845

Customer #: 487

| Description | Amount |
|---|-----------------|
| Advanced Cyber Crimes Streamwood Police Department 01/22/2018 - 01/23/2018 Jeffrey Priest Raul Valladares | |
| Canceled on 9/20/17 | \$135.00 |
| TOTAL | \$135.00 |

Please tear off and return this portion with your payment



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Website Address: www.nemrt.com



Teresa Cascarano
College Of DuPage Police Department
425 Fawell Blvd, HEC 1040
Glen Ellyn, IL 60137-6599

Make Check payable to:

North East Multi-Regional Training, Inc.
355 Smoke Tree Plaza
North Aurora, IL 60542

Meeting Code: WINTER18 Event Code: 00000026 Event Name: Advanced Cyber Crimes

Date: 01/30/2018

Invoice #: 230845

Customer #: 487

2/21/2018

transaction.do (286x1168)

355 SHINE TREE PLAZA
NORTH AURORA, IL 60542
630-856-8860
mary@ncmt.com

NORTH EAST MULTI REG
801025000055142367801

Date: 02/21/2018 11:46:35 AM

CREDIT CARD SALE

VISA
CARD NUMBER: *****6995 K
TRAN AMOUNT: \$135.00
APPROVAL CD: 054612
RECORD #: 000
CLERK ID: 500734
INVOICE #: 230845

X

Raul Valladares

I AGREE TO PAY THE ABOVE TOTAL AMOUNT
ACCORDING TO THE CARD ISSUER AGREEMENT
(MERCHANT AGREEMENT IF CREDIT VOUCHER)

Merchant Copy

355 SHINE TREE PLAZA
NORTH AURORA, IL 60542
630-856-8860
mary@ncmt.com

NORTH EAST MULTI REG

Date: 02/21/2018 11:46:35 AM

CREDIT CARD SALE

VISA
CARD NUMBER: *****6995 K
TRAN AMOUNT: \$135.00
APPROVAL CD: 054612
RECORD #: 000
CLERK ID: 500734
INVOICE #: 230845

Customer Copy



State of Illinois

CERTIFICATE

Awarded to *Raul Valladares*

by the ILLINOIS LAW ENFORCEMENT
TRAINING AND STANDARDS BOARD

In recognition of the successful completion of the 16.00 hour course in

Advanced Cyber Crimes

at Streamwood Police Department

from 1/22/18 to 1/23/18

The course complies with the guidelines of the following mandates(s):

Human Rights; Lead Homicide

Thomas M. Giesoner

School Director

W. Patrick Hartman

Chairman of the Board

T. B. J. J.

Executive Director