

Information:

Drawer: Accounts Payable - Invoices  
Number: \*\*\*\* Other Redaction \*\*\*\*  
Name: \*\*\*\* Other Redaction \*\*\*\*  
Invoice Number: C088608  
Invoice Date:  
PO Number:  
Check Number: E0066345  
Check Amount: \$ 998.50  
Check Date: 04/04/2018  
Voucher Number: V0507792  
AP Type: IM Invoices < \$15,000  
Redaction Type: Other  
Document Type: Independent Contractor Agreement

Document Below  
Note: Parts of the image below may have been redacted

VENDOR NUMBER <b>1544840</b>		AGREEMENT NUMBER: <b>C088608</b>		
ACCOUNT NUMBER/AMOUNT				
FUND	FUNCTION	DEPARTMENT	OBJECT	AMOUNT
<b>61</b>	<b>90</b>	<b>60621</b>	<b>5509001</b>	<b>998.50</b>
APPROVED-Supervisor, Purchasing				DATE <b>1 / 1</b>

# **\* Independent Contractor Agreement**

(Not to be used for contracts in excess of \$5,000.00)

PER BILL RATHE, OF TO PAY, 4/2/2018

BOBBY MAREK BM

## **PART I. Complete PRIOR to performance of contractual services.**

Name Nicholas Suderstrom Tax I.D. #/S.S. # [REDACTED]  
(THIS NAME SHOULD BE THE SAME NAME THAT APPEARS ON LINE 1 OF THE W-9 FORM). (ALSO COMPLETE AND SIGN FORM W-9 ATTACHED)

Phone Number (310) 405-9898 (No college employee may be paid as an independent contractor.)

Street 3461 S. 27th Ave

City, State, Zip Code Bozeman MT 59718

Agrees to perform on 10/25/17 the following services for the College of DuPage:

Speaking engagement for total of \$215. The College also agrees to pay for travel expenses as follows: Inn at Waters Edge hotel stay for \$321.90, Alaska Airlines airfare for \$461.60.

If additional space is needed, please continue description of services on separate pages and attach to this form.

The sum of \$ 998.50 will be paid to the independent contractor upon completion of the services. The contractor will be responsible for all taxes related to income from the above services. The contractor understands that he/she is self employed and must carry at his/her own cost any insurance coverage such as workers compensation, medical, property & liability including auto related to the above mentioned services.

This is a "work for hire" agreement. All rights to materials produced or products from services rendered are property of College of DuPage in perpetuity.

The contractor agrees to hold College of DuPage, its Trustees, officers, directors, agents, successors and assigns, harmless from and against all losses, damages, injuries, claims demands, and expenses, including attorneys' fees, which may arise during performance of this agreement.

☐ I have read Board Procedure #15-465 and have determined that the individual on this agreement meets the definition of an independent contractor.

Karen M. Kuhl  
DEPARTMENT AUTHORIZED SIGNATOR

4/2/18  
DATE

All independent contractors must also certify below regarding the status of any educational loans as required by state law effective January 1, 1988.

(Must Check One)

☐ I certify that I am not in default on an educational loan guaranteed by the State in the amount of \$600.00 or more.

☐ I certify that I am in default on an educational loan guaranteed by the State in the amount of \$600.00 or more and I agree to make arrangements for repayment of this loan with the maker or guarantor within six months from the date of this contract.

I agree with the terms stated above and certify that I have received a copy of the contractual agreement.

SIGNATURE OF INDEPENDENT CONTRACTOR

DATE

## **PART II. Complete AFTER performance of contractual services.**

Authorized Signator certifies that the contractual services described in Part I above were completed satisfactorily and authorizes payment in full. (Payment is to be made only after completion of the contractual service.)

Karen M. Kuhl  
COLLEGE AUTHORIZED SIGNATURE

4/2/18  
DATE

COUNTER SIGNATOR (OPTIONAL)

DATE

\*See board policy, procedures and instructions on reverse side.

(This agreement is VOID if amount exceeds \$5,000.00)

Original forward to Accounts Payable; Blue, Purchasing Dept.; Yellow, Signator; Pink, Contractor

**\* Independent Contractor Agreement**

(Not to be used for contracts in excess of \$5,000.00)

VENDOR NUMBER <b>1544840</b>		AGREEMENT NUMBER: <b>C088608</b>		
ACCOUNT NUMBER/AMOUNT				
FUND <b>01</b>	FUNCTION <b>90</b>	DEPARTMENT <b>00621</b>	OBJECT <b>5509001</b>	AMOUNT <b>998.50</b>
APPROVED—Supervisor, Purchasing				DATE <b>1 / 1</b>

**PART I. Complete PRIOR to performance of contractual services.**

Name Nicholas Suderstrom

(THIS NAME SHOULD BE THE SAME NAME THAT APPEARS ON LINE 1 OF THE W-9 FORM).

Tax I.D. #/S.S. #

(ALSO COMPLETE AND SIGN FORM W-9 ATTACHED)

Phone Number (310) 405-9898

(No college employee may be paid as an independent contractor.)

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City, State, Zip Code Bozeman MT 59718

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- ☐ I have read Board Procedure #15-465 and have determined that the individual on this agreement meets the definition of an independent contractor.

DEPARTMENT AUTHORIZED SIGNATOR

DATE

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(Must Check One)

- ☒ I certify that I am not in default on an educational loan guaranteed by the State in the amount of \$600.00 or more.  
☐ I certify that I am in default on an educational loan guaranteed by the State in the amount of \$600.00 or more and I agree to make arrangements for repayment of this loan with the maker or guarantor within six months from the date of this contract.

I agree with the terms stated above and certify that I have received a copy of the contractual agreement.

[Signature]  
SIGNATURE OF INDEPENDENT CONTRACTOR

3/27/18  
DATE

**PART II. Complete AFTER performance of contractual services.**

Authorized Signator certifies that the contractual services described in Part I above were completed satisfactorily and authorizes payment in full. (Payment is to be made only after completion of the contractual service.)

COLLEGE AUTHORIZED SIGNATURE

DATE

COUNTER SIGNATOR (OPTIONAL)

DATE

\*See board policy, procedures and instructions on reverse side.  
(This agreement is VOID if amount exceeds \$5,000.00)

Original forward to Accounts Payable; Blue, Purchasing Dept.; Yellow, Signator; Pink, Contractor

REC'D

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

2-6-18  
C.O.D.

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: 1/15/2018  
Vendor ID: \_\_\_\_\_

Invoice Number	P.O. Number/ Req. Number	Fund	Func.	Dept.	Object	Object Descrip.	Amount
						Airfare	\$ 461.60
						Hotel	\$ 321.90
						Speaking Fee	\$ 215.00
Grand Total							\$ 998.50

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: Nicholas Soderstrom

Other  
Instructions: \_\_\_\_\_

Payee Address: 3461 S. 27th Ave. Bozeman,  
MT 59718

Description on Check:

Approvals:

Prepared By: Nicholas Soderstrom Ken Gray Approved By: \_\_\_\_\_ Date: \_\_\_\_\_  
Signature: [Signature] Signature: [Signature] Date: 1/29/18  
Payment Due: \$998.50 Approved By: \_\_\_\_\_ Date: \_\_\_\_\_  
Board Approved Date: \_\_\_\_\_ Signature: [Signature] Date: 1/29/18  
Approved By Division: \_\_\_\_\_ Signature: [Signature] Date: \_\_\_\_\_

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



inn at  
water's edge

Dr. Nick Soderstrom  
3461 South 27th Ave  
Bozeman, MT 59718

Cust BkNo. :  
Room No. : 3010  
Arrival : 10-24-17  
Departure : 10-26-17  
Folio No. : 2996  
Conf. No. : 79915195  
Cashier : 961  
A/R No. :

Date	Description	Charges	Credits
10-24-17	Room Charge	145.00	
10-24-17	Room Tax City 5%	7.25	
10-24-17	Room Tax State 6%	8.70	
10-25-17	Room Charge	145.00	
10-25-17	Room Tax City 5%	7.25	
10-25-17	Room Tax State 6%	8.70	
10-26-17	Visa XXXXXXXXXXXXX9919 XX/XX		321.90

Thank you for visiting Inn at Water's Edge. We look forward to  
welcoming you back soon!

<b>Total Charges</b>	<b>321.90</b>	
<b>Total Credits</b>		<b>321.90</b>
<b>Balance</b>		<b>0.00</b>
		<b>USD</b>

Signature: \_\_\_\_\_

I have received the goods and / or services in the amount shown herein. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or association fails to pay for any part or the full amount of these charges. If a credit card is charged, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.



Nick Soderstrom &lt;nsoderstrom87@gmail.com&gt;

## Confirmation Letter - BJXUK 10/24/17 - from Alaska Airlines

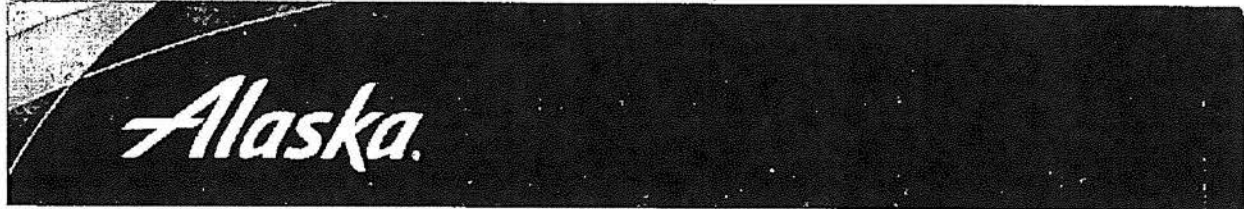
Alaska Airlines &lt;Alaska.IT@alaskaair.com&gt;

Thu, Sep 21, 2017 at 10:07 AM

Reply-To: Alaska Airlines &lt;Alaska.ConfirmationLetter@alaskaair.com&gt;

To: NSODERSTROM87@gmail.com

If you have trouble viewing this message, click here to request a plain text-only version of this email:



Confirmation code:

BJXUK

You're all set. Thank you for booking with Alaska and we look forward to seeing you on board.

Manage your trip online and view full details about your flight reservation and fare. You can choose seats, make service requests, and make changes to your flight.

### Manage Trip

Flight	Departs	Arrives	Class	Traveler(s)	Seat(s)
<b>SkyWest</b>	Bozeman (BZN)	Seattle (SEA)	T	Nicholas	13C
SkyWest 3353	Tue, Oct 24	Tue, Oct 24	(Coach)	Soderstrom	
Bombardier CRJ-700	7:20 am	8:30 am			

Operated By SkyWest Airlines as AlaskaSkyWest. Check in with Alaska Airlines.

<b>Alaska</b>	Seattle (SEA)	Chicago-O'Hare	T	Nicholas	31D
Alaska 22	Tue, Oct 24	(ORD)	(Coach)	Soderstrom	
Boeing 737-900	12:00 pm	Tue, Oct 24			
		6:06 pm			

<b>Alaska</b>	Chicago-O'Hare	Seattle (SEA)	G	Nicholas	31D
Alaska 23	(ORD)	Thu, Oct 26	(Coach)	Soderstrom	
Boeing 737-900	Thu, Oct 26	12:45 pm			
	10:18 am				

<b>SkyWest</b>	Seattle (SEA)	Bozeman (BZN)	G	Nicholas	13C
SkyWest 3334	Thu, Oct 26	Thu, Oct 26	(Coach)	Soderstrom	
Bombardier CRJ-700	4:00 pm	6:41 pm			

Operated By SkyWest Airlines as AlaskaSkyWest. Check in with Alaska Airlines.

### Hotels and cars

### Additional information

**Prohibited hazardous materials**

The Federal Government has specific restrictions about hazardous materials in carry-on and checked baggage. Failure to declare hazardous materials may result in civil and criminal penalties. For more information, visit: the FAA website

**Summary of airfare charges**

Nicholas Soderstrom

Mileage Plan # \*\*\*\*\*5731

Ticket 0272151975956

Base Fare and Surcharges \$386.98

Taxes and Other Fees \$74.62

Per person total \$461.60

**Total charges for air travel USD \$461.60**

View all taxes, fees and charges

**Total charges and credits**

Nonrefundable fare of \$461.60 was charged to the Visa card with number \*\*\*\*\*9919 held by Nicholas C Soderstrom on 09/21/2017.

**Trip protection by Allianz Global Assistance**

Purchase trip protection benefits and travel assistance services for your trip from [Allianz Global Assistance](#) [Learn more](#)

**Flight notifications**

Flight notifications are how we will contact you with important travel information. Get alerts about departures, arrivals, gate changes, cancellations and more.  
SIGN UP

**Web Check-in**

Please check in with the operating airline for your trip 1 to 24 hours prior to your departure.

You can confirm check in policies and procedures at the operating airline's website.

**Manage your flight reservation**

View full details about your flight reservation and fare. You can choose seats, make service requests, and make changes online

Low price guarantee  
Powered by Expedia®

**Need a hotel?**

Use our hotel deal finder to book a hotel in Chicago-O'Hare

**Need a ride?**

Use our car deal finder to rent a car in Chicago-O'Hare

**Get the Visa Signature® card**

Apply now for the [Alaska Airlines Visa Signature® card](#) and earn 30,000 bonus miles after qualifying purchases.



APPLY

**Sign up for email deals**

Our email deals features exclusive fare sales, discount codes and web specials tailored to your preferences, as well as Alaska Airlines Mileage Plan offers and news.

[Sign up](#)**Service requests**

Alaska Airlines provides a meet and assist service for travelers who need assistance through the airport. Request this service online or over the phone.

[View reservation](#)**InFlight service**

Many Alaska Airlines flights offer the option to purchase a meal. We've also equipped almost all of our fleet with InFlight WiFi so you can surf the web or stay



Alaska Airlines reservations 1-800-ALASKAAIR (1-800-252-7522)

MANAGE

### Baggage

**Carry-on baggage:** On Alaska Airlines flights, each traveler is limited to one carry-on bag that measures up to 10 x 17 x 24 inches, plus one personal item. See our carry-on baggage page for more information.

**Checked baggage:** Alaska Airlines rules and fees apply for this itinerary. The first and second checked bag fees are \$25 each. See the checked baggage page for details and exceptions.



**Alaska Airlines® baggage service guarantee**  
Get your bags in 20 minutes guaranteed.

### Your rights

Please review important information about your consumer rights and our limitations of liability.

You may also wish to review the contract of carriage applicable to your trip.

Please do not reply to this email. Need help? Contact us.

If you have an account with us and wish to unsubscribe from marketing email, visit the manage email page. You may still receive transactional messages from Alaska Airlines. Privacy Notice

This email was sent to nsoderstrom87@gmail.com.

Reference number PL73564619. Requested at 09/21/2017 09:56 AM

Alaska Airlines, PO Box 68900, Seattle, WA 98168-0900.  
&copy; 2017 Alaska Airlines. All rights reserved.

[View our Privacy Notice](#) or [Contact us](#).

productive inflight. For more info, please see our on board guide.

### For your security

Do you have a redress number? If so, and you did not provide it when you made your reservation, please visit [www.alaskaair.com](http://www.alaskaair.com) or call reservations.

To learn more about redress numbers go to [www.dhs.gov/trip](http://www.dhs.gov/trip).

### Destinations

#### View information for:

Seattle  
Chicago-O'Hare  
Bozeman

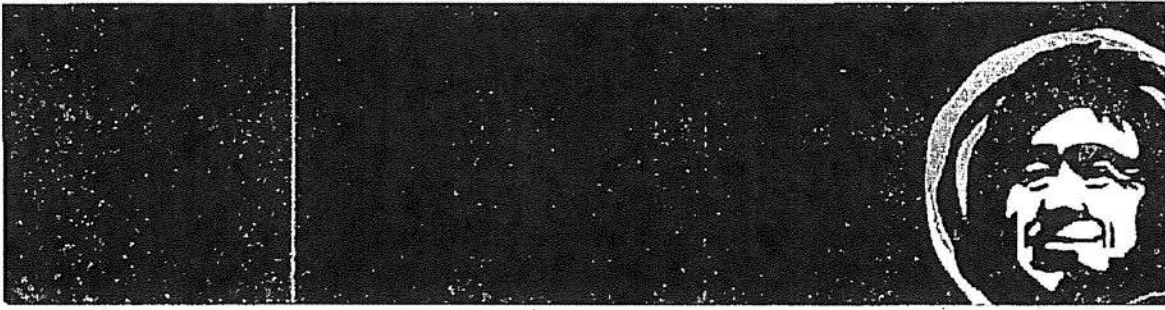
### Contact us

Share your thoughts with us, contact us.



1/15/2018

Gmail - Confirmation Letter - BJXUK 10/24/17 - from Alaska Airlines



01/15/2018

Nicholas Soderstrom, Ph.D.

3461 S. 27<sup>th</sup> Ave.

Bozeman, MT 59718

(310) 405-9898

soderstrn@dickinson.edu

To:

College of DuPage

425 Fawell Blvd

Glen Ellyn, IL 60137

INVOICE: 10/25/2017

Date of Service: 10/25/2017

Service: 1-hour guest lecture entitled, "Leveraging Desirable Difficulties to Enhance Learning:  
When the Path of MORE Resistance is Best"

Rate: \$215.00

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From: marekr@cod.edu  
Sent: Wed Apr 04 10:23:06 CDT 2018  
To: invoicing@cod.edu  
CC:  
Subject: FW: Scanned from a Xerox Multifunction Device  
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Bobby Marek Accounts Payable Team Leader Cash Disbursements/Payroll Department College of DuPage  
425 Fawell Blvd l SRC 2132 l Glen Ellyn, IL 60137-6599 phone 630-942-2229 l marekr@cod.edu  
-----Original Message----- From: marekr@cod.edu Sent: Wednesday, April 4, 2018 10:19 AM To: Marek, Robert Subject: Scanned from a Xerox Multifunction Device Please open the attached document. It was scanned and sent to you using a Xerox Multifunction Device. Attachment File Type: pdf, Multi-Page Multifunction Printer Location: SRC-3 Device Name: Printer-266

[attachment: Scanned from a Xerox Multifunction Printer.pdf]