

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1089608
Vendor Name: Stivers Staffing Services
Invoice Number: 8004818
Invoice Date: 03/24/18
PO Number: B0355721
Check Number: E0066583
Check Amount: \$ 718.00
Check Date: 04/18/2018
Department ID: 00374
Reviewer Name: Kelly Hannapel
Voucher Number: V0508112
Redaction Type: None
Document Type: AP Invoice

Document Below

STIVERS STAFFING SERVICES

BO# 355721-OK-244
GL #01-20-00374 5106001

PLEASE RETURN
DUPLICATE INVOICE WITH
YOUR REMITTANCE TO

200 WEST MONROE STREET
SUITE 1300
CHICAGO, IL 60606-5015

0000460

04/10/18 - ANDREA LIEDTKE

COLLEGE OF DUPAGE
425 FAWELL BLVD RM 2134

GLEN ELLYN IL

DEANNA DUVAL

60137

TERMS: NET CASH

| DATE | INVOICE NUMBER | PERIOD ENDING DATE |
|-------------|----------------|--------------------|
| MAR 24 2018 | 800481B | MAR 24 2018 |

EMPLOYEE

CODE

HOURS

RATE

TOTAL

LISA SALTIEL

ACADEMIC AFFAIRS

AO

0104

40.00

17.950

718.00

TOTAL

718.00

RECEIVED

APR 03 2018

HUMAN RESOURCES

FOR YOUR STAFFING NEEDS CALL STIVERS STAFFING SERVICES

REMEMBER WE CONVERT HOURS & MINUTES TO DECIMALS, THUS 1 HOUR, 15 MINUTES IS BILLED AS 1.25 HOURS

THIS INVOICE DOES NOT NECESSARILY REPRESENT THE COMPLETION OF AN ASSIGNMENT SINCE IT IS OUR PRACTICE TO BILL THE HOURS WORKED EACH WEEK.

ORIGINAL INVOICE

**INVOICE REVIEW
OKAY TO PAY
KELLY HANNAPEL**

CHICAGO

IMPORTANT - ON BACK OF LAST COPY: (1) SEND ORIGINAL REPORT TO STIVERS BY FRIDAY OF EACH WEEK. (2) GIVE CLIENT 2ND COPY. (3) KEEP 3RD COPY.

TIME REPORTS THAT ARE NOT RECEIVED AT STIVERS BY THE FOLLOWING MONDAY NOON WILL BE PAID A WEEK LATE.

EMPLOYEE NAME (PLEASE PRINT): Lisa M. Saltiel

WEEK ENDING (MM/DD/YY): 3/24/18

LAST 4 DIGITS OF YOUR SOCIAL SECURITY NUMBER: 7295

| | START TIME | LUNCH OUT | LUNCH IN | FINISH TIME | TOTAL HOURS FOR DAY |
|-------------|------------|-----------|----------|-------------|---------------------|
| MON. | 8:00 | 12:00 | 12:30 | 4:30 | 8 |
| TUE. | 8:00 | 12:00 | 12:30 | 4:30 | 8 |
| WED. | 8:00 | 12:00 | 12:30 | 4:30 | 8 |
| THURS. | 8:00 | 12:00 | 12:30 | 4:30 | 8 |
| FRI. | 8:00 | 12:00 | 12:30 | 4:30 | 8 |
| SAT. | | | | | |
| SUN. | | | | | |
| TOTAL HOURS | | | | | 40 |

EMPLOYEE SIGNATURE: Lisa M. Saltiel

STIVERS STAFFING SERVICES, INC.

COMPANY NAME: College of Dupage

ADDRESS: 425 Fawell Blvd.

CITY/STATE: Glen Ellyn, Illinois

DEPARTMENT OR DIVISION: Academic Outreach

REGULAR TIME: 40 HRS. MIN.

OVERTIME: 0 HRS. MIN.

CLIENT SIGNATURE: Andrea Liedtke

UP TO 40 HERE OVER 40 HERE

Approval includes verification of hours worked and acceptance of terms and conditions.

From: holmwoode@cod.edu
Sent: Thu Apr 05 13:17:39 CDT 2018
To: invoicing@cod.edu
CC:
Subject: DC - Stivers Inv #8004818

Hello, Please process the attached Stivers invoice, # 8004818, for payment against BO #355721. If there are any questions, please do not hesitate to contact me. Thank you, Elizabeth Holmwood Academic Outreach Programs | Administrative Assistant College of DuPage BIC 3B11, 425 Fawell Blvd., Glen Ellyn, IL 60137 630-942-4811 | holmwoode@cod.edu -----Original Message----- From: holmwoode@cod.edu Sent: Thursday, April 05, 2018 1:15 PM To: Holmwood, Elizabeth Subject: DC - Stivers Inv #8004818 Please open the attached document. It was scanned and sent to you using a Xerox Multifunction Printer. Attachment File Type: pdf, Multi-Page Multifunction Printer Location: IC3B11WC3655 Device Name: Printer-308

[attachment: DC - Stivers Inv _8004818.pdf]