

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1188426

Vendor Name: Village of Glen Ellyn, Illinois

Invoice Number: 071918

Invoice Date: 07/19/18

PO Number:

Check Number: E0068433

Check Amount: \$ 525.25

Check Date: 07/25/2018

Department ID: 00000

Reviewer Name:

Voucher Number: V0521399

Redaction Type: None

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: 7/19/2018

Vendor ID: 1188426

Invoice Number	P.O. Number/ Req. Number	Fund	Func.	Dept.	Object	Object Descrip.	Amount
June 2018 Village Hotel Tax		01	00	00000	2900012	Hotel/Motel Tax	\$ 525.25

AP VERIFIED

Grand Total

\$ 525.25

07/23/18 - BETHANY CRUSE

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: Village of Glen Ellyn

Other
Instructions:Payee Address: 535 Duane Street
Glen Ellyn, IL 60137

Description on Check:

Payment of June 2018 Village of Glen Ellyn Hotel Taxes.

Approvals:

Prepared By: Kevin Mickey

Approved By:

Date:

Signature:

Signature:

Date:

Payment Due:

Approved By:

Date:

Board Approved Date:

Signature:

Approved By Division VP:

Date:

Signature:

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

Monthly Hotel and Motel Tax Return
Due Village of Glen Ellyn



Month and Year June 2018

Name Inn at Water's Edge

Address 425 Fawell Blvd.

City, State, Zip Code Glen Ellyn, IL 60137

Customer ID

Code

Gross Receipts \$10,505

Rate 5%

Amount of Tax \$525.25

Signature Jamie Funderie

Title Hotel Manager Date 7/2/18

Make checks payable to:

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