

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 0447874
Vendor Name: Mr Joseph A. LaMantia
Invoice Number: 71018
Invoice Date: 07/10/18
PO Number:
Check Number: 0238008
Check Amount: \$ 1,000.00
Check Date: 08/15/2018
Department ID: 02737
Reviewer Name: None
Voucher Number: V0521366
Redaction Type: FERPA
Document Type: AP Invoice

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: 7/10/2018

Vendor ID: [REDACTED]

Invoice Number	P.O. Number/ Req. Number	Fund	Func.	Dept.	Object	Object Descrip.	Amount
71018		06	10	[REDACTED]	5309001	Other Contractual Services Exp	\$ 1,000.00

APPROVED

07/26/18 - DANIEL DEASY

\$ 1,000.00

--- \$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.

Payee Name:

Payee Address:

Other
Instructions:

Description on Check:

GenCyber Volunteer

Approvals:

Prepared By:

Yvonne Bedford

Signature:

Yvonne Bedford

Payment Due:

ASAP

Board Approved Date:

Approved By:

Daniel Deasy

Signature:

[Signature]

Approved By

Signature:

[Signature]

Approved By Division VP:

Signature:

Date:

JUL 10 2018

Date:

7/11/18

Date:

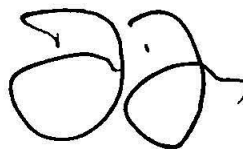
Return Approved Request and All Supporting Documents to: Accounts Payable (SRC 2132 A), acctpay@cod.edu

[REDACTED] (name) agree to volunteer to help in COD
[REDACTED] funded by the National Security Agency and the
National Science Foundation. I understand that I will receive a \$1000 stipend for assisting
during the program.

I will assist in the following activities under the supervision of the instructors:

- I will prepare the Raspberry Pi's for the classroom
- I will assist in the preparation of the program
- I will assist in the cleanup of the program
- I will organize supplies and materials for the program
- I will set up and assist in the Cyber Crime Challenge
- I will perform other duties as assigned.

APPROVED



JUL 10 2018

6/25/18

Date

7/16/18

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What is backup withholding?* on page 2.

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.

From: cruseb199@cod.edu
Sent: Mon Jul 30 12:35:32 CDT 2018
To: invoicing@cod.edu
CC:
Subject: FW: [REDACTED]

From: Baymon, Tiana
Sent: Monday, July 30, 2018 12:22 PM
To: Bedford, Yvonne <bedford@cod.edu>
Cc: Cruse, Bethany <cruseb199@cod.edu>; Landers, Susan <landerss@cod.edu>
Subject: RE: Joseph A. LaMantia

Hi Yvonne,

Please use the acct# 06-10-**02737**-53090001 or [REDACTED] There is budget to cover him there.

The week #2 Teacher Camp check requests should go to this G/L as well.

Please let me know if you have any questions.

Thanks,

Tiana Baymon
Grant Accountant
College of DuPage
425 Fawell Blvd. Glen Ellyn, IL 60137-6599
Phone: 630-942-2723
Fax: 630-942-2297
baymont@cod.edu

From: Bedford, Yvonne
Sent: Monday, July 30, 2018 11:16 AM
To: Baymon, Tiana <baymont@cod.edu>
Cc: Cruse, Bethany <cruseb199@cod.edu>
Subject: F [REDACTED]

Hello Tiana,

Please see the email below from Bethany Cruse to adjust the budget.

See also the attachment.

I will also be submitting additional Gen Cyber Week #2 Check Requests for the Teachers 02737. There are 31 x \$300.00.

Please let Bethany and I know when you have completed.

Regards, Yvonne

From: Cruse, Bethany
Sent: Monday, July 30, 2018 10:17 AM
To: Bedford, Yvonne <bedford@cod.edu>
Subject: [REDACTED]

Hi Yvonne,
This is over budget, please add funds and advise.

Thanks

Bethany Cruse
AP Lead
College of DuPage
Room SRC 2132
425 Fawell Boulevard
Glen Ellyn, IL 60137
630-942-4294
cruseb199@cod.edu