

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1089608
Vendor Name: Stivers Staffing Services
Invoice Number: 8005328
Invoice Date: 06/30/18
PO Number: B0359439
Check Number: E0068765
Check Amount: \$ 6,010.29
Check Date: 08/15/2018
Department ID: 00789
Reviewer Name: Barbara Groves
Voucher Number: V0522614
Redaction Type: None
Document Type: AP Invoice

Document Below

PLEASE RETURN
DUPLICATE INVOICE WITH
YOUR REMITTANCE TO

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

STIVERS

STAFFING SERVICES

200 West Monroe Street
Chicago, Illinois 60606-5015
Phone: 312/558-3550

BO# 359439

TERMS: NET CASH

DATE	INVOICE NUMBER	PERIOD ENDING DATE
JUN 30 2018	B005328	JUN 30 2018

EMPLOYEE

CODE

HOURS

RATE

TOTAL

ELENA MCNAB

0104

38.00

17.950

682.10

RECEIVED ADJUNCT FACILITY

JUL 09 2018

TOTAL 682.10

HUMAN RESOURCES

INVOICE REVIEWED

OKAY TO PAY 08/09/18
BARBARA GROVIS

APPROVED
08/13/18 KIRK OVERSTREET

From: grovesb16@cod.edu
Sent: Sat Aug 04 07:23:54 CDT 2018
To: invoicing@cod.edu
CC:
Subject: Stivers - McNab #8005328

Barb Groves
Administrative Assistant
Vice President of Academic Affairs Office
College of DuPage | 425 Fawell Blvd | BIC 3400 | Glen Ellyn, IL 60137
630-942-2005 (ph) | 630-942-3925 (fax)

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1089608
Vendor Name: Stivers Staffing Services
Invoice Number: 8005360
Invoice Date: 07/07/18
PO Number: B0359439
Check Number: E0068765
Check Amount: \$ 6,010.29
Check Date: 08/15/2018
Department ID: 00789
Reviewer Name: Barbara Groves
Voucher Number: V0522615
Redaction Type: None
Document Type: AP Invoice

Document Below

PLEASE RETURN
DUPLICATE INVOICE WITH
YOUR REMITTANCE TO

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

200 West Monroe Street
Chicago, Illinois 60606
Phone: 312/558-4339

BO# 259439

TERMS: NET CASH

DATE	INVOICE NUMBER	PERIOD ENDING DATE
JUL 07 2018	8005360	JUL 07 2018

EMPLOYEE	CODE	HOURS	RATE	TOTAL
----------	------	-------	------	-------

ELENA MCNAB

AD	0104	19.00	17.950	341.05
----	------	-------	--------	--------

ADJUST FACILITY

RECEIVED

TOTAL 341.05

JUL 16 2018

HUMAN RESOURCES

STIVERS
STAFFING
SERVICES

INVOICE REVIEWED

OKAY TO PAY

BARBARA GROVES 08/09/18

APPROVED

08/13/18 - KIRK OVERSTREET

0000460

COLLEGE OF DUPAGE
425 FAWELL BLVD - CH 2434

GLEN ELLYN IL

DEANNA DUVAL

From: grovesb16@cod.edu
Sent: Sat Aug 04 07:25:18 CDT 2018
To: invoicing@cod.edu
CC:
Subject: Stivers - McNab #8005360

Barb Groves
Administrative Assistant
Vice President of Academic Affairs Office
College of DuPage | 425 Fawell Blvd | BIC 3400 | Glen Ellyn, IL 60137
630-942-2005 (ph) | 630-942-3925 (fax)

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1089608
Vendor Name: Stivers Staffing Services
Invoice Number: 8005391
Invoice Date: 07/14/18
PO Number: B0359439
Check Number: E0068765
Check Amount: \$ 6,010.29
Check Date: 08/15/2018
Department ID: 00789
Reviewer Name: Barbara Groves
Voucher Number: V0522616
Redaction Type: None
Document Type: AP Invoice

Document Below

PLEASE RETURN
DUPLICATE INVOICE WITH
YOUR REMITTANCE TO

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

200 West Monroe Street
Chicago, Illinois 60606
Phone: 312/558-3515

BO# 359439

TERMS: NET CASH

DATE	INVOICE NUMBER	PERIOD ENDING DATE
JUL 14 2018	8005391	JUL 14 2018

STIVERS
STAFFING
SERVICES

APPROVED

08/13/18 - KIRK OVERSTREET

INVOICE REVIEWED

OKAY TO PAY

BARBARA GROVES 08/09/18

0000463

COLLEGE OF DUPAGE
465 FAIRVIEW RD-RM 2134

GLEN ELLYN, IL

60137

DEANNA DEVA

EMPLOYEE

CODE

HOURS

RATE

TOTAL

ELENA MCNAB

AD

0104

38.00

17.950

682.10

ADJUT FACILITY

RECEIVED

TOTAL 682.10

JUL 23 2018

From: grovesb16@cod.edu
Sent: Sat Aug 04 07:22:20 CDT 2018
To: invoicing@cod.edu
CC:
Subject: Stivers - McNab #8005391

Barb Groves
Administrative Assistant
Vice President of Academic Affairs Office
College of DuPage | 425 Fawell Blvd | BIC 3400 | Glen Ellyn, IL 60137
630-942-2005 (ph) | 630-942-3925 (fax)

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1089608
Vendor Name: Stivers Staffing Services
Invoice Number: 8005425
Invoice Date: 07/21/18
PO Number: B0359439
Check Number: E0068765
Check Amount: \$ 6,010.29
Check Date: 08/15/2018
Department ID: 00789
Reviewer Name: Barbara Groves
Voucher Number: V0522617
Redaction Type: None
Document Type: AP Invoice

Document Below

PLEASE RETURN
DUPLICATE INVOICE WITH
YOUR REMITTANCE TO

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

200 West Monroe Street
Chicago, Illinois 60606-5015
Phone: 312/558-3550

BO# 359439

TERMS: NET CASH

DATE	INVOICE NUMBER	PERIOD ENDING DATE
JUL 21 2018	8005425	JUL 21 2018

EMPLOYEE	CODE	HOURS	RATE	TOTAL
ELENA MCNAB	AD 0104	38.00	17.950	682.10
TOTAL				682.10

RECEIVED

JUL 30 2018

0000460

COLLECTOR DUFFAGE
425 PABELL BLVD - RM 2134

GLEN ELLYN, IL

DEANNA DUFFAL

60527

STIVERS

STAFFING
SERVICES

INVOICE REVIEWED

OKAY TO PAY

BARBARA GROVES 08/09/18

APPROVED

08/13/18 - KIRK OVERSTREET

From: grovesb16@cod.edu
Sent: Sat Aug 04 07:21:04 CDT 2018
To: invoicing@cod.edu
CC:
Subject: Stivers - McNab #8005425

Barb Groves
Administrative Assistant
Vice President of Academic Affairs Office
College of DuPage | 425 Fawell Blvd | BIC 3400 | Glen Ellyn, IL 60137
630-942-2005 (ph) | 630-942-3925 (fax)

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1089608
Vendor Name: Stivers Staffing Services
Invoice Number: 8005426
Invoice Date: 07/21/18
PO Number: B0359342
Check Number: E0068765
Check Amount: \$ 6,010.29
Check Date: 08/15/2018
Department ID: 14625
Reviewer Name:
Voucher Number: V0522769
Redaction Type: None
Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

PLEASE RETURN
DUPLICATE INVOICE WITH
YOUR REMITTANCE TO

STIVERS

STAFFING SERVICES

200 West Monroe Street
Chicago, Illinois 60606-5015
Phone: 312/558-3550

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

0000460

COLLEGE OF DUPAGE
425 FAWELL BLVD RM 2124

GLEN ELLYN IL

DEANNA DUVAL

AP VERIFIED

08/08/18 - ROBERT MAREK

TERMS: NET CASH

60137

DATE	INVOICE NUMBER	PERIOD ENDING DATE
JUL 21 2018	8005426	JUL 21 2018

Bo # 359342

EMPLOYEE

CODE

HOURS

RATE

TOTAL

REBECCA SAMPSON

CONTINUING ED

AD

0104

39.25

17.950

704.54

APPROVED

TOTAL 704.54

RECEIVED

JUL 30 2018

AUG 07 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

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.

NAME (PLEASE PRINT)
Rebecca Sampson

32

WEEK ENDING (SAT.)
01/21/18
MO. DAY YEAR

LAST 4 DIGITS OF YOUR
SOCIAL SECURITY
NUMBER

7921

START TIME		LUNCH OUT		LUNCH IN		FINISH TIME		TOTAL HOURS FOR DAY	
S	MIN	HRS	MIN	HRS	MIN	HRS	MIN	HRS	MIN
12	00	12	30	1	00	4	30	8	00
12	00	12	00	12	30	4	00	7	50
1	05	12	40	1	05	4	45	8	20
3	10	1	30	2	00	4	45	8	30
8	00	12	00	1	00	4	30	7	50

STIVERS

TIME REPORT

STAFFING SERVICES, INC

39.25

COMPANY NAME
815
ADDRESS
805
CITY/STATE

College of DuPage
425 Falmouth Drive
Glen Ellyn, IL 60137

DEPARTMENT OR DIVISION

Continuing Education

39.20 or per Ashley McAuley

SIGNATURE
Rebecca Sampson

TOTAL HOURS
39.70

REGULAR TIME
HRS. MIN.
39 70

OVERTIME
HRS. MIN.
— —

CLIENT SIGNATURE:

Ashley McAuley

I certify that the hours shown hereon were worked by me during the period designated, and were certified by an authorized representative of the Customer. I understand that I am to contact the office after completing this assignment to discuss another assignment.

UP TO 40 HERE

OVER 40 HERE

Approval includes verification of hours

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1089608
Vendor Name: Stivers Staffing Services
Invoice Number: 8005392
Invoice Date: 07/14/18
PO Number:
Check Number: E0068765
Check Amount: \$ 6,010.29
Check Date: 08/15/2018
Department ID: 00461
Reviewer Name:
Voucher Number: V0522806
Redaction Type: None
Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

STIVERS

STAFFING SERVICES

200 West Monroe Street
Chicago, Illinois 60606-5015
Phone: 312/558-3550

PLEASE RETURN
DUPLICATE INVOICE WITH
YOUR REMITTANCE TO

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

0000460

COLLEGE OF DUPAGE
425 FAWELL BLVD-RM 2134

TERMS: NET CASH

GLEN ELLYN, IL

DEANNA DUVAL

AP VERIFIED
08/09/18 - ROBERT MAREK

DATE	INVOICE NUMBER	PERIOD ENDING DATE
JUL 14 2018	8005392	JUL 14 2018

EMPLOYEE

CODE

HOURS

RATE

TOTAL

ANITA BHALLA

REGISTRATION

AD 0104 32.00 15.200 486.40

APPROVED TO PAY

RECEIVED

TOTAL 486.40

Vendor # 1089608 – Stiver's Staffing
GL Acct # 01-30-00461-5309001

JUL 23 2018

HUMAN RESOURCES



8/2/18

Cesar Flores

Date

Manager – Registration Services

JS 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

CHICAGO

IMPORTANT

TYPE OR USE PREPRINTED, READ INSTRUCTIONS
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)

Anita Bhalla-Das

4

WEEK ENDING (SAT.)

7/14/18
MO. DAY YEARLAST 4 DIGITS OF YOUR
SOCIAL SECURITY
NUMBER

3915

	START TIME		LUNCH OUT		LUNCH IN		FINISH TIME		TOTAL HOURS FOR DAY	
	HRS	MIN	HRS	MIN	HRS	MIN	HRS	MIN	HRS	MIN
MON.	8	30	12	30	1	00	5	00	8	00
TUES.	8	30	12	30	1	00	5	00	8	00
WED.	8	30	12	30	1	00	5	00	8	00
THURS.	8	30	12	30	1	00	5	00	8	00
FRI.										
SAT.										
SUN.										

STIVERS

TIME REPORT

STAFFING SERVICES, INC

COMPANY NAME

College of DuPage

ADDRESS

425 Powell Blvd

CITY/STATE

Glen Ellyn, IL 60137

DEPARTMENT OR DIVISION

Enrollment Support Services

32.00

EMPLOYEE SIGNATURE

Anita Bhalla-Das

TOTAL HOURS

32.0

REGULAR TIME

HRS. MIN.

32 0

UP TO 40 HERE

OVERTIME

HRS. MIN.

OVER 40 HERE

CLIENT SIGNATURE

Pamela L. Lianard

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

I hereby certify that the hours shown hereon were worked by me during
the week ending designated, and were certified by an authorized
representative of the Customer. I understand that I am to contact the
Stivers office after completing this assignment to discuss another
assignment, and, if I do not do so, Stivers may assume that I am not

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1089608
Vendor Name: Stivers Staffing Services
Invoice Number: 8005457
Invoice Date: 07/28/18
PO Number:
Check Number: E0068765
Check Amount: \$ 6,010.29
Check Date: 08/15/2018
Department ID: 00461
Reviewer Name:
Voucher Number: V0522807
Redaction Type: None
Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

STIVERS

STAFFING SERVICES

200 West Monroe Street
Chicago, Illinois 60606-5015
Phone: 312/558-3550

PLEASE RETURN
DUPLICATE INVOICE WITH
YOUR REMITTANCE TO

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

0000460

COLLEGE OF DUPAGE
425 FAWELL BLVD-RM 2134

TERMS: NET CASH

GLEN ELLYN IL

60137

DEANNA DUVAL

DATE	INVOICE NUMBER	PERIOD ENDING DATE
JUL 28 2018	8005457	JUL 28 2018

AP VERIFIED

08/09/18 - ROBERT MAREK

REGISTRATION

EMPLOYEE

CODE

HOURS

RATE

TOTAL

CHERYL KENNEDY

AD

0104

32.00

15.200

486.40

APPROVED TO PAY

TOTAL 486.40

Vendor # 1089608 - Stiver's Staffing
GL Acct # 01-30-00461-5309001

RECEIVED

AUG 06 2018

HUMAN RESOURCES



Cesar Flores

Manager - Registration Services

8/8/18

Date

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

32.00

CHICAGO

IMPORTANT

TYPE OR USE BALL POINT PEN. READING OF THIS CARD ON BACK OF CARD ONLY. NO OTHERS. STAMPED BY THE COMPANY. EMPLOYER AND CUSTOMER.

EMPLOYEE NAME (PLEASE PRINT) **CHERRY, KENNEDY**

	START TIME		LUNCH OUT		STOP TIME		TOTAL TIME	
	HR	MIN	HR	MIN	HR	MIN	HR	MIN
MON.	8	30	12	30	1	00	5	00
TUES.	8	30	12	30	1	00	5	00
WED.	8	30	12	30	1	00	5	00
THURS.	8	30	12	30	1	00	5	00
FRI.								
SAT.								
SUN.								

EMPLOYEE SIGNATURE **Cherry Kennedy**

TOTAL HOURS **32**

I hereby certify that the hours shown hereon were worked by me during the week ending designated, and were certified by an authorized representative of the Customer. I understand that I am to contact the Silver's office after completing this assignment to discuss another assignment and if I do not do so, Silver's may assume that I am no longer available for work.

DATE **3/21/53** TIME **11:00**

BY **JOHN J. HARRIS** SUPERVISOR

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1089608
Vendor Name: Stivers Staffing Services
Invoice Number: 8005460
Invoice Date: 07/28/18
PO Number:
Check Number: E0068765
Check Amount: \$ 6,010.29
Check Date: 08/15/2018
Department ID: 00461
Reviewer Name:
Voucher Number: V0522808
Redaction Type: None
Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

STIVERS

STAFFING SERVICES

200 West Monroe Street
Chicago, Illinois 60606-5015
Phone: 312/558-3550

PLEASE RETURN
DUPLICATE INVOICE WITH
YOUR REMITTANCE TO

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

0000460

COLLEGE OF DUPAGE
425 FAWELL BLVD-RM 2134

TERMS: NET CASH

GLEN ELLYN IL

60137

DEANNA DUVAL

DATE	INVOICE NUMBER	PERIOD ENDING DATE
JUL 28 2018	8005460	JUL 28 2018

REGISTRATION

AP VERIFIED

08/09/18 - ROBERT MAREK

EMPLOYEE

RATE

TOTAL

ANITA BHALLA

AD

0104

32.00

15.200

486.40

TOTAL

486.40

APPROVED TO PAY

Vendor # 1089608 - Stiver's Staffing
GL Acct # 01-30-00461-5309001



Cesar Flores

8/8/18

Date

Manager - Registration Services

RECEIVED

AUG 06 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

CHICAGO

IMPORTANT

TYPE OR USE BALLPOINT PEN; READ INSTRUCTIONS
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.

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

EMPLOYEE NAME (PLEASE PRINT)

Anita Bhalla-Das

(8)

WEEK ENDING (SAT.)

7/28/18
MO. DAY YEARLAST 4 DIGITS OF YOUR
SOCIAL SECURITY
NUMBER

3915

	START TIME		LUNCH OUT		LUNCH IN		FINISH TIME		TOTAL HOURS FOR DAY	
	HR.	MIN.	HR.	MIN.	HR.	MIN.	HR.	MIN.	HR.	MIN.
MON.	8	30	12	30	1	00	5	00	8	00
TUES.	8	30	12	30	1	00	5	00	8	00
WED.	8	30	12	30	1	00	5	00	8	00
THURS.	8	30	12	30	1	00	5	00	8	00
FRI.										
SAT.										
SUN.										

EMPLOYEE SIGNATURE

Anita Bhalla-Das

TOTAL HOURS

32.0

I hereby certify that the hours shown herein were worked by me during the week ending designated, and were certified by an authorized representative of the Customer. I understand that I am to contact the Stivers office after completing this assignment to discuss another assignment, and, if I do not do so, Stivers may assume that I am no longer available for work.

STIVERS

TIME REPORT
STAFFING SERVICES, INC.

COMPANY NAME

College of DuPage

ADDRESS

425 Towell Blvd

CITY/STATE

Glen Ellyn, IL 60137

DEPARTMENT
OR DIVISION

Enrollment Support Services

32.00

REGULAR TIME

HRS. MIN.

32 0

OVERTIME

HRS. MIN.

CLIENT SIGNATURE:

Anita Bhalla-Das

UP TO 40 HERE

OVER 40 HERE

Approval Includes verification of hours
worked and acceptance of terms and
conditions on reverse.

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1089608

Vendor Name: Stivers Staffing Services

Invoice Number: 8005424

Invoice Date: 07/21/18

PO Number:

Check Number: E0068765

Check Amount: \$ 6,010.29

Check Date: 08/15/2018

Department ID: 00461

Reviewer Name:

Voucher Number: V0522809

Redaction Type: None

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

Document Below

STIVERS

STAFFING SERVICES

200 West Monroe Street
Chicago, Illinois 60606-5015
Phone: 312/558-3550

PLEASE RETURN
DUPLICATE INVOICE WITH
YOUR REMITTANCE TO

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

0000460

COLLEGE OF DUPAGE
425 FAWELL BLVD-RM 2134

TERMS: NET CASH

GLEN ELLYN IL

60137

DEANNA DUVAL

DATE	INVOICE NUMBER	PERIOD ENDING DATE
JUL 21 2018	8005424	JUL 21 2018

AP VERIFIED

08/09/18 - ROBERT MAREK

EMPLOYEE	CODE	HOURS	RATE	TOTAL
----------	------	-------	------	-------

CHERYL KENNEDY	AO	0104	32.00	15.200	486.40
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REGISTRATION

APPROVED TO PAY

TOTAL 486.40

Vendor # 1089608 – Stiver's Staffing
GL Acct # 01-30-00461-5309001


Cesar Flores
Manager – Registration Services

8/2/18
Date

RECEIVED
JUL 30 2018
HUMAN RESOURCES

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

CHICAGO

IMPORTANT -

TYPE OR USE BALLPOINT PEN; READ INSTRUCTIONS
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.

• SPE
TIME REP
NOT REC'D
BY TH
MONDAY
PAID ADV

EMPLOYEE NAME (PLEASE PRINT)

Cheryl Kennedy

11

WEEK ENDING (SAT)

7/21/18
MO. DAY YEARLAST 4 DIGITS OF YOUR
SOCIAL SECURITY
NUMBER

	START TIME		LUNCH OUT		LUNCH IN		FINISH TIME		TOTAL HOURS FOR DAY	
	HRS.	MIN.	HRS.	MIN.	HRS.	MIN.	HRS.	MIN.	HRS.	MIN.
MON.	8	30	12	30	1	00	5	00	8	00
TUES.	8	30	12	30	1	00	5	00	8	00
WED.	8	30	12	30	1	00	5	00	8	00
THURS.	8	30	12	30	1	00	5	00	8	00
FRI.										
SAT.										
SUN.										

STIVERS

STAFFING SERVICES, INC

TIME REPORT

COMPANY
NAME

C.O.D.

32.00

ADDRESS

425 Fawell Blvd

CITY/STATE

Glen Ellyn IL

DEPARTMENT
OR DIVISION

Registration Enrollment Support

EMPLOYEE SIGNATURE

Cheryl Kennedy

TOTAL HOURS
32.00

I hereby certify that the hours shown hereon were worked by me during the week ending designated, and were certified by an authorized representative of the Customer. I understand that I am to contact the Stivers office after completing this assignment to discuss another assignment, and if I do not do so, Stivers may assume that I am no longer available for work.

REGULAR TIME

HRS. MIN.

32 00

UP TO 40 HERE

OVERTIME

HRS. MIN.

OVER 40 HERE

CLIENT SIGNATURE



Approval includes verification
worked and acceptance of
conditions on reverse.

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1089608
Vendor Name: Stivers Staffing Services
Invoice Number: 8005427
Invoice Date: 07/21/18
PO Number:
Check Number: E0068765
Check Amount: \$ 6,010.29
Check Date: 08/15/2018
Department ID: 00461
Reviewer Name:
Voucher Number: V0522810
Redaction Type: None
Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

STIVERS

STAFFING SERVICES

200 West Monroe Street
Chicago, Illinois 60606-5015
Phone: 312/558-3550

PLEASE RETURN
DUPLICATE INVOICE WITH
YOUR REMITTANCE TO

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

0000460

COLLEGE OF DUPAGE
425 FAWELL BLVD-RM 2134

TERMS: NET CASH

GLEN ELLYN IL

DEANNA DUVAL

DATE	INVOICE NUMBER	PERIOD ENDING DATE
JUL 21 2018	8005427	JUL 21 2018

AP VERIFIED
08/09/18 - ROBERT MAREK

EMPLOYEE	CODE	HOURS	RATE	TOTAL
ANITA BHALLA	AD 0104	32.00	15.200	486.40

REGISTRATION

APPROVED TO PAY

TOTAL 486.40

Vendor # 1089608 - Stiver's Staffing
GL Acct # 01-30-00461-5309001


Cesar Flores

8/2/18
Date

Manager - Registration Services

RECEIVED
JUL 30 2018
HUMAN RESOURCES

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

CHICAGO

IMPORTANT -

TYPE OR USE BALLPOINT PEN, READ INSTRUCTIONS
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.

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

EMPLOYEE NAME (PLEASE PRINT)

Anita Bhalla-Das

3

WEEK ENDING (SAT.)

7/21/88
MO. DAY YEARLAST 4 DIGITS OF YOUR
SOCIAL SECURITY
NUMBER

3915

	START TIME		LUNCH OUT		LUNCH IN		FINISH TIME		TOTAL HOURS FOR DAY	
	HR	MIN	HR	MIN	HR	MIN	HR	MIN	HR	MIN
MON.	8	30	12	30	1	00	5	00	8	00
TUES.	8	30	12	30	1	00	5	00	8	00
WED.	8	30	12	30	1	00	5	00	8	00
THURS.	8	30	12	30	1	00	5	00	8	00
FRI.										
SAT.										
SUN.										

STIVERS

TIME REPORT

STAFFING SERVICES, INC.

COMPANY
NAME

College of DuPage

ADDRESS

425 Fawcett Blvd

CITY/STATE

Glen Ellyn, IL 60137

DEPARTMENT
OR DIVISION

Enrollment Support Services

32.00

EMPLOYEE SIGNATURE

Anita Bhalla-Das

TOTAL HOURS

32.0

I hereby certify that the hours shown hereon were worked by me during
the week ending designated, and were certified by an authorized
representative of the Customer. I understand that I am to contact the
Stivers office after completing this assignment to discuss another
assignment, and, if I do not do so, Stivers may assume that I am no
longer available for work.

REGULAR TIME

HRS.	MIN.
32	0

UP TO 40 HERE

OVERTIME

HRS.	MIN.

OVER 40 HERE

CLIENT SIGNATURE

K. J. J. J.

Approval includes verification of hours
worked, and acceptance of terms and
conditions on reverse.

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1089608
Vendor Name: Stivers Staffing Services
Invoice Number: 8005390
Invoice Date: 07/14/18
PO Number:
Check Number: E0068765
Check Amount: \$ 6,010.29
Check Date: 08/15/2018
Department ID: 00461
Reviewer Name:
Voucher Number: V0522811
Redaction Type: None
Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

PLEASE RETURN
DUPLICATE INVOICE WITH
YOUR REMITTANCE TO

STIVERS

STAFFING SERVICES

200 West Monroe Street
Chicago, Illinois 60606-5015
Phone: 312/558-3550

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

0000460

COLLEGE OF DUFACE
425 FAWELL BLVD-AN 213

TERMS: NET CASH

GLEN ELLYN, IL

DEANNA DUVAL

AP-VERIFIED
08/09/18 - ROBERT MAREK

DATE	INVOICE NUMBER	PERIOD ENDING DATE
JUL 14 2018	8005390	JUL 14 2018

EMPLOYEE

CODE

HOURS

RATE

TOTAL

CHERYL KENNEDY

AD

0104

32.00

15.200

486.40

REGISTRATION

APPROVED TO PAY

Vendor # 1089608 - Stiver's Staffing

GL Acct # 01-30-00461-5309001

TOTAL 486.40

RECEIVED

JUL 23 2018

HUMAN RESOURCES

Cesar Flores

Date

Manager - Registration Services

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ORIGINAL INVOICE

