

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1533532

Vendor Name: Illinois Association of Co

Invoice Number: 100118

Invoice Date:

PO Number:

Check Number: 0240008

Check Amount: \$ 880.00

Check Date: 10/08/2018

Department ID: 00835

Reviewer Name:

Voucher Number: V0530382

Redaction Type: Other

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

Document Below

1533532

10/08/2018

0240008

100118
100118

V0530382
V0530382

Conf.Registration and
Conf.Registration and

0190008355209014
0190008355209018

300.00
580.00



880.00

0240008

Sob Miller 10/9/18

PAY ONLY EIGHT HUNDRED EIGHTY AND 00/100 DOLLARS

10/08/2018

\$*****880.00

Illinois Association of Commun
D/B/A IACCAI
3221 Northfield Dr
Springfield IL 62702

College of DuPage - Accounts Payable
Check Request Form
revised 12/18/17

V530382

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: 10/1/2019
Vendor ID: 1533532

Invoice Number	P.O. Number/ Req. Number	Fund	Func.	Dept.	Object	Object Descrip.	Amount
		01	90	00835	5209014	Tuition Reimb-Faculty	\$ 300.00
		01	90	00835	5209018	Dues - Faculty	\$ 580.00

AP VERIFIED
10/08/18 - MARIA ZERRUDO

Grand Total \$ 880.00

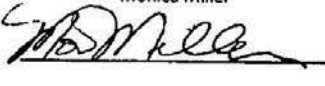
- Check the appropriate box below:
- ☐ We, the undersigned, hereby certify that the goods/services, for which payment is herein requested, have been provided in a satisfactory condition/manner. Consequently, payment is appropriate at this time.
- ☒ We, the undersigned, hereby certify that the goods/services, 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.

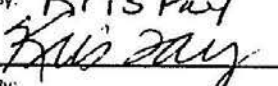


Payee Name: Illinois Association of Community College Agriculture Instructors (IACCAI)
Payee Address: 3221 Northfield Dr., Springfield, IL 62702

Other Instructions: Manual Check, Please Call Monica Miller X3074

Description on Check:
Conference Registration and Membership for Full Time Faculty: Brian Clement and Frank Balestri

Approvals:

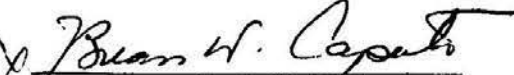
Prepared By: Monica Miller
Signature: 
Payment Due: _____
Board Approved Date: _____

Approved By: Kris Fay
Signature: 
Approved By: 
Signature: 
Approved By Division VP: _____
Signature: _____

Date: 10-1-18
Date: 10-1-18
Date: 10-1-18

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

Manual Check



Brian W. Caputo, Ph.D., C.P.A.
Vice President/CEO
Administrative Affairs

Miller, Monica

From: Clement, Brian
Sent: Tuesday, September 18, 2018 9:19 AM
To: Miller, Monica
Subject: FW: [INVOICE]: 09/18/18-IACCAI CONFERENCE, OCTOBER 11-12, 2018 (Registration Ends 9/28/18 11:59 pm)

From: Caboodle Events <server@caboodle.events>
Sent: Tuesday, September 18, 2018 8:37 AM
To: Clement, Brian <clement@cod.edu>
Subject: [INVOICE]: 09/18/18-IACCAI CONFERENCE, OCTOBER 11-12, 2018 (Registration Ends 9/28/18 11:59 pm)



Invoice

IACCAI CONFERENCE, OCTOBER 11-12, 2018 (Registration Ends 9/28/18 11:59 pm)

Brian Clement	1. IACCAI Full Conference Registration	\$150.00
Brian Clement	B. Option II - \$290 (IACCAI-\$40; IAVAT (Associate/Retired)-\$50; IACTE-\$60; NAAE-\$60; ACTE-\$80)	\$290.00
Total	\$440.00	

Please send payment to: Illinois FFA Center

3221 Northfield Drive

Springfield, IL 62702

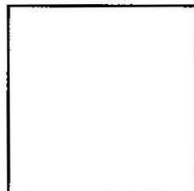
Do not reply to this email. The inbox is not monitored. Contact the event organizer for any assistance.

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Miller, Monica

From: Balestri, Frank
Sent: Tuesday, September 25, 2018 9:33 AM
To: Miller, Monica
Subject: FW: [INVOICE]: 09/19/18-IACCAI CONFERENCE, OCTOBER 11-12, 2018 (Registration Ends 9/28/18 11:59 pm)

From: Caboodle Events <server@caboodle.events>
Sent: Wednesday, September 19, 2018 2:11 PM
To: Balestri, Frank <balestrif@cod.edu>
Subject: [INVOICE]: 09/19/18-IACCAI CONFERENCE, OCTOBER 11-12, 2018 (Registration Ends 9/28/18 11:59 pm)



Invoice

IACCAI CONFERENCE, OCTOBER 11-12, 2018 (Registration Ends 9/28/18 11:59 pm)

Frank Balestri	3. Banquet Only - Thursday, October 11, 2018	\$50.00
Frank Balestri	B. Option II - \$290 (IACCAI-\$40; IAVAT (Associate/Retired)-\$50; IACTE-\$60; NAAE-\$60; ACTE-\$80)	\$290.00
Frank Balestri	5. Friday Lunch Only - October 12, 2018	\$50.00
Frank Balestri	2. Lunch Only - Thursday, October 11, 2018	\$50.00
Total	\$440.00	

Please send payment to: Illinois FFA Center

3221 Northfield Drive

Springfield, IL 62702

Do not reply to this email. The inbox is not monitored. Contact the event organizer for any assistance.

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[HOME \(/\)](#)

[ABOUT \(/ABOUT.HTML\)](#)

[CONFERENCE \(/CONFERENCE.HTML\)](#)

[MEMBERSHIP RESOURCES \(/MEMBERSHIP-RESOURCES.HTML\)](#)

[LEADERSHIP \(/LEADERSHIP.HTML\)](#)



(/)

52nd Annual IACCAI Conference

Hosted by: Lake Land College

Illinois Association of Community College Agriculture Instructors (IACCAI)

52nd Annual Conference & Ag Articulation Conference

Thursday and Friday, October 11 & 12, 2018

Hosted by Lake Land College

Ag College, University, and High School instructors are invited to attend along with all agricultural and educational support groups (guidance counselors, administrators, advisory councils, etc.). Please forward to individuals that may be interested in attending.

Hotel Information:

Holiday Inn Mattoon IL 217 235 2060 Block rate of \$92.00

Quality Inn Block rate of \$72 217 235 0222

Room is held until October 1

Please use the link below to submit registration for this year's conference. The registration form also has the option to pay IACCAI membership dues, allowing for invoices to be paid with one check. As a reminder, members must pay dues by October 31 each year to remain in good standing.

We look forward to networking with you at the IACCAI 52nd Annual Conference and hope that you will find it to be informative and enjoyable!

CABOODLE REGISTRATION INSTRUCTIONS

(<https://docs.google.com/document/d/1qoQRZFXDMRAoetDz1dzBkINHdnQ6P8TqwLN7KItSdZI/edit?usp=sharing>)

PLEASE NOTE: If you would like to include dues with your conference registration or switch to partial day registration vs full registration, you will need to click the green "Add Registration Items" button before submitting your registration. If you can't find this button, it can always be found by clicking on the Cart button that can be found by clicking in the top right hand corner of the screen.

CONFERENCE REGISTRATION

(<https://ilffa.caboodle.events/events/8482b91e-d8d6-4bc5-929d-d661ead08282>)

Conference Cost: \$150 for full conference or \$50 for each individual meal function (partial day).

Tentative Conference Agenda

Thursday October 11, 2018 – Lake Land College West Building
5001 Lake Land Blvd., Mattoon, IL 61938

9 a.m. – 2:00 p.m. Group Tours – We will be leaving promptly at 9:00 a.m.

10:00 – 11:00 Energy Farm

Speakers: Tim Mies, Director of Energy Farm

Operations & Dr. Sarah Lovell, Crop Sciences

Undergraduate Program Coordinator

Address: 4110 S. Race St.

Urbana, IL 61802

energyfarm@illinois.edu

11:00 - 11:15 IACCAI Guests Carpool to Turner Hall

Address: 1102 S Goodwin Ave, Urbana, IL 61801

11:15 – 12:00 Computer Science + Crop Sciences Informational
Session, Turner Hall

Speakers: Dr. Carrie Butts-Wilmsmeyer, Research
Assistant Professor & Dr. Matthew Hudson,
Professor

12:00 - 1:00 Lunch with ACES at the Spice Box, Bevier Hall

Speakers: Casey McFadden, Coordinator of Transfer
Recruitment & ACES Representatives

1:00 - 2:00 Leadership in Agriculture Informational Session, Bevier
Hall

Speakers: Gary Ochs, Instructor Agriculture Science
Education & Agricultural Leadership Education
Students

2:00 - 2:45 IACCAI Guests Carpool back to the Energy Farm –
Thanks for Visiting!

Please arrive at the West Building by 8:45 for the tours. We will be
taking college vans; so, please RSVP to
sorrick@lakelandcollege.edu for your seat and lunch order on tour. For those traveling
from the north feel free to meet us at ___ by 9:50am for the tours.
Thank You

3:00 - 3:30 p.m. Conference Registration, West Building room 119

3:45 - 4:45 p.m. IAI Ag Panel Meeting – West Building Room 119
(All are WELCOME and Encouraged to attend)

5:00 - 6:00 p.m. University Reports: ISU, SIU-C, U of I, WIU; West Building
Room 119

6:00 - 7:00 p.m. Hotel Check-In and Social Time at:
West Building Atrium

7:00 – 8:30 p.m. Opening Session and Dinner

- Call to Order – Ryan Orrick
- Welcome
- Guest Speakers
- Dinner
- Introductions
- Conference Overview
- Organizational Awards Presentations and
Recognitions

Friday, October 12, 2018 – Lake Land College Campus – West Building Room 119
5001 Lake Land Blvd., Mattoon, IL 61938

7:30 - 8:00 a.m. Breakfast/Welcome - Room 119

8:00 - 9:00 a.m. Articulation & Program Area Committee Meetings

Program Administrator / Division Chairs Room 136

Ag Education / Ag Mech Subject Area Room 127

Ag Computers / Horticulture Subject Area Room 135

Agronomy/ Ag Business&Production Area Room 124

9:00 - 10:00 a.m.

Teaching/Classroom Information; TOGGLE

TREATMENT

10:00 - 11:00 a.m.

Teaching/Classroom Information; Guided PATHWAYS

Darci Cather Dean of Guided Pathways Lake

Land College

11:00 – 12:00

Lunch West Building 119/120

12:00 – 1:00

Organization Committee Meetings

Ag Advocacy – Room 136

Articulation – Room 127

IL PAS – Room 135

In-Service – Room 124 (Next year's conference

planning)

1:00 - 2:30

IACCAI Business Meeting

Call to Order

Approval of Agenda

Approval of Minutes

Financial Report

Affiliate Reports/Updates

Articulation Committee Reports

IACCAI Committee Reports

Old Business

New Business

Election of 2017-18 Officers

Adjourn

Professional Development Request Full-Time Faculty

This form must be signed and approved **before** enrolling in courses, workshops, seminars or submitting requests for professional dues or periodical subscriptions. **Requests submitted without prior approval are not eligible for reimbursement or course credit.**
Please refer to the "Concur Professional Development Procedure" in the Forms Library to complete your request/expense.

Employee Name: _____

Department: _____ Date: 09/19/2018

PROFESSIONAL DEVELOPMENT REIMBURSEMENT REQUEST: ☐ REIMBURSEMENT ☒ PRE-PAYMENT†

☒ Workshop/Conference ☒ Dues/Subscriptions

☐ Books

☒ Travel*

Title/Sponsor: Illinois Association of Community College Agriculture Instructors (IACCAI)

Date of Event: October 11 and 12

Tuition, Registration, Dues, Subscription Fee: \$ 150+290

Travel: \$ 250 Books: \$ _____

Course Number: _____ Date: _____

College or University: _____

Course Name: _____

Number of Credits: _____
semester hours quarter hours

Tuition, Registration, Fee: \$ _____

Provide rationale that includes how this will improve your ability to work with students and/or teach your courses:
(attach additional page if necessary)

IACCAI provides the opportunity for community college and university instructors to discuss course articulation, best practices, professional development and guided pathways.

☒ Approved ☐ Not Approved _____ Date: 9.20.18
Dean/Associate Dean

*Up to \$600.00 per year (of the \$1,850.00) may be used for pre-approved travel related expenses in accordance with College Travel Policies.

†When requesting a pre-payment, attach a registration form or invoice to this form. If using Concur, please contact Accounts Payable for payment.
If I receive an advance, I understand I must produce evidence of satisfactory completion of the course or seminar within 60 days. Failure to do this will result in the cost of the course or seminar being deducted from my paycheck. (Initial here)

COURSE CREDIT FOR RANGE CHANGE REQUEST:

Course Number: _____ Dates: _____ College or University: _____

Course Name: _____ Number of Credits Earned: _____
semester hours quarter hours

Provide rationale that includes how this will improve your ability to work with students and/or teach your courses:
(attach additional page if necessary)

☐ Approved ☐ Not Approved _____ Date: _____
Dean Vice President

Return this signed form along with attachments showing proof of payment and proof of satisfactory completion, if applicable, to Human Resources.

HR USE ONLY

HR has recorded _____ semester hours

The cumulative hours recorded are: _____

HR Approval: _____ Date: _____

Account #01-90-00835-52090-14: Faculty Tuition

Account #01-90-00835-52090-18: Faculty Dues

Amount of reimbursement: \$ _____

Date request sent to Accounts Payable: _____

Date request approved: _____

Date expense approved: _____

HR Approval: _____

Professional Development Request Procedure

*For any reimbursement requiring payment for travel expenses, employee **MUST** use Concur. If no travel reimbursement is requested, employee may send the paper form to Human Resources for manual processing.*

1. Complete the information requested on the form and have it signed by your supervisor and department authorized budget signatory.
2. Submit a request in Concur, attaching your approved Professional Development form and allocating the expenses to the appropriate funding source. (For professional development, use department 00835, function 90). *When completing your header in Concur, be sure to choose "Request Type 2" to ensure proper routing.*
3. Once approval process is complete, employee may register for the class/conference/seminar.
4. Upon completion, submit an expense report through Concur, attaching approved Professional Development form, proof of payment and proof of attendance. Allocate expenses to the appropriate funding source. *Again, be sure you choose "Report Type 2" in your header to ensure proper routing.*

For Pre-Payments:

1. Complete the information requested on the form, check the appropriate box indicating you are requesting a pre-payment, and initial the statement that is in italics underneath. Submit the request in Concur, attaching the form and invoice, and allocating the expenses to the appropriate funding source.
2. Once the approval process is complete, contact Accounts Payable to make the payment. **Please note: Concur will NOT automatically make the payment — you must contact A/P to do that.**
3. Within 60 days of completion, put through an expense report in Concur, attaching Professional Development form, proof of payment (indicating that it was "company paid") and proof of attendance. Human Resources will authorize deductions of pre-payments from payroll if evidence of completion is not submitted within 60 days.

**For pre-payments not using Concur, a check will be made payable to the sponsor/organization and will be returned to the employee.*

For Credit Requests, please send form with proof of attendance/completion (grade report or certificate) to Human Resources for processing.

Professional Development Request Full-Time Faculty

This form must be signed and approved **before** enrolling in courses, workshops, seminars or submitting requests for professional dues or periodical subscriptions. **Requests submitted without prior approval are not eligible for reimbursement or course credit.**
Please refer to the "Concur Professional Development Procedure" in the Forms Library to complete your request/expense.

Employee Name: _____

Department: _____ Date: 09/19/2018

PROFESSIONAL DEVELOPMENT REIMBURSEMENT REQUEST: ☐ REIMBURSEMENT ☒ PRE-PAYMENT†

☒ Workshop/Conference ☐ Dues/Subscriptions

☐ Books ☐ Travel*

Title/Sponsor: Illinois Association of Community College Agriculture Instructors (IACCAI)

Date of Event: October 11 and 12

Tuition, Registration, Dues, Subscription Fee: \$ 150 + 290

Travel: \$ 400 Books: \$ _____

Course Number: _____ Date: _____

College or University: _____

Course Name: _____

Number of Credits: _____
semester hours quarter hours

Tuition, Registration, Fee: \$ _____

Provide rationale that includes how this will improve your ability to work with students and/or teach your courses:
(attach additional page if necessary)

IACCAI provides the opportunity for community college and university instructors to discuss course articulation, best practices, professional development and guided pathways.

☒ Approved ☐ Not Approved _____ Date: 9.20.18
Dean/Associate Dean

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†When requesting a pre-payment, attach a registration form or invoice to this form. If using Concur, please contact Accounts Payable for payment.
If I receive an advance, I understand I must produce evidence of satisfactory completion of the course or seminar within 60 days. Failure to do this will result in the cost of the course or seminar being deducted from my paycheck.

F.B. (Initial here)

COURSE CREDIT FOR RANGE CHANGE REQUEST:

Course Number: _____ Dates: _____ College or University: _____

Course Name: _____ Number of Credits Earned: _____
semester hours quarter hours

Provide rationale that includes how this will improve your ability to work with students and/or teach your courses:
(attach additional page if necessary)

☐ Approved ☐ Not Approved _____ Date: _____
Dean Vice President

Return this signed form along with attachments showing proof of payment and proof of satisfactory completion, if applicable, to Human Resources.

HR USE ONLY

HR has recorded _____ semester hours

The cumulative hours recorded are: _____

HR Approval: _____ Date: _____

Account #01-90-00835-52090-14: Faculty Tuition

Account #01-90-00835-52090-18: Faculty Dues

Amount of reimbursement: \$ _____

Date request sent to Accounts Payable: _____

Date request approved: _____

Date expense approved: _____

HR Approval: _____

Professional Development Request Procedure

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2. Once the approval process is complete, contact Accounts Payable to make the payment. **Please note: Concur will NOT automatically make the payment – you must contact A/P to do that.**
3. Within 60 days of completion, put through an expense report in Concur, attaching Professional Development form, proof of payment (indicating that it was "company paid") and proof of attendance. Human Resources will authorize deductions of pre-payments from payroll if evidence of completion is not submitted within 60 days.

*For pre-payments not using Concur, a check will be made payable to the sponsor/organization and will be returned to the employee.

For Credit Requests, please send form with proof of attendance/completion (grade report or certificate) to Human Resources for processing.

Humphrey, Vera

From: Miller, Monica
Sent: Monday, October 1, 2018 4:22 PM
To: Humphrey, Vera
Subject: Manual Check Request for Brian Clement and Frank Balestri payable to IACCAI
Attachments: Manual Check Request for Brian Clement and Frank Balestri payable to IACCAI.pdf

Hi Vera,

I gave Katrina Swon an item for Kirk Overstreet's signature today. Kirk approved it. This is a manual check request for two full time faculty member's registration and dues. The vendor, who is in our system, does not take American Express. Please let me know if there are any questions.

Hope all is well by you.

Monica