

Information:

Drawer: Accounts Payable - Invoices

Number: **** FERPA Redaction ****

Name: **** FERPA Redaction ****

Invoice Number: C087952

Invoice Date:

PO Number:

Check Number: 0241748

Check Amount: \$ 760.00

Check Date: 10/17/2018

Voucher Number: V0533815

AP Type: IM Invoices < \$15,000

Redaction Type: FERPA

Document Type: Independent Contractor Agreement

Document Below

Note: Parts of the image below may have been redacted

*** Independent Contractor Agreement**

V0533815

(Not to be used for contracts in excess of \$5,000.00)

✓ STUDENT W-9 7/27/18 CHK

VENDOR NUMBER		AGREEMENT NUMBER: C087952		
ACCOUNT NUMBER/AMOUNT				
FUND	FUNCTION	DEPARTMENT	OBJECT	AMOUNT
	01-30	12031	5302001	
				130.00
APPROVED-Supervisor, Purchasing				DATE
				/ /

PART I. Complete PRIOR to performance of contractual services.

Agrees to perform on _____ the following services for the College of DuPage:

Women's Volleyball Official 9/27/18 COD vs. Milwaukee

Email: _____

If additional space is needed, please continue description of services on separate pages and attach to this form.

The sum of \$ 130.00 will be paid to the independent contractor upon completion of the services. The contractor will be responsible for all taxes related to income from the above services. The contractor understands that he/she is self employed and must carry at his/her own cost any insurance coverage such as workers compensation, medical, property & liability including auto related to the above mentioned services.

This is a "work for hire" agreement. All rights to materials produced or products from services rendered are property of College of DuPage in perpetuity.

The contractor agrees to hold College of DuPage, its Trustees, officers, directors, agents, successors and assigns, harmless from and against all losses, damages, injuries, claims demands, and expenses, including attorneys' fees, which may arise during performance of this agreement.

☒ I have read Board Procedure #15-465 and have determined that the individual on this agreement meets the definition of an independent contractor.


DEPARTMENT AUTHORIZED SIGNATOR

10/2/18
DATE

All independent contractors must also certify below regarding the status of any educational loans as required by state law effective January 1, 1988.
(Must Check One)

- ☒ I certify that I am not in default on an educational loan guaranteed by the State in the amount of \$600.00 or more.
- ☐ I certify that I am in default on an educational loan guaranteed by the State in the amount of \$600.00 or more and I agree to make arrangements for repayment of this loan with the maker or guarantor within six months from the date of this contract.

I agree with _____ received a copy of the contractual agreement.

9/27/18
DATE

PART II. Complete AFTER performance of contractual services.

Authorized Signator certifies that the contractual services described in Part I above were completed satisfactorily and authorizes payment in full.
(Payment is to be made only after completion of the contractual service.)


COLLEGE AUTHORIZED SIGNATURE

DATE

COUNTER SIGNATOR (OPTIONAL)

DATE

*See board policy, procedures and instructions on reverse side.
(This agreement is VOID if amount exceeds \$5,000.00)

Original forward to Accounts Payable; Blue, Purchasing Dept.; Yellow, Signator; Pink, Contractor

Information:

Drawer: Accounts Payable - Invoices

Number: **** FERPA Redaction ****

Name: **** FERPA Redaction ****

Invoice Number: C088048

Invoice Date:

PO Number:

Check Number: 0241748

Check Amount: \$ 760.00

Check Date: 10/17/2018

Voucher Number: V0533816

AP Type: IM Invoices < \$15,000

Redaction Type: FERPA

Document Type: Independent Contractor Agreement

Document Below

Note: Parts of the image below may have been redacted

*** Independent Contractor**

Agreement

V0533816

(Not to be used for contracts in excess of \$5,000.00)

STUDENT W-9 9/1/18 CHK

PART I. Complete PRIOR to performance of contractual services.

VENDOR NUMBER		AGREEMENT NUMBER: C088048		
ACCOUNT NUMBER/AMOUNT				
FUND	FUNCTION	DEPARTMENT	OBJECT	AMOUNT
		01-30-12031-5302001		200.00
APPROVED-Supervisor, Purchasing				DATE
				/ /

Agrees to perform on 9/1/18 the following services for the College of DuPage:

DATE(S)
2 matches @ \$100 each = \$200.00
Women's Volleyball official Chaparral Invite 9/1/18.

If additional space is needed, please continue description of services on separate pages and attach to this form.

The sum of \$ 200.00 will be paid to the independent contractor upon completion of the services. The contractor will be responsible for all taxes related to income from the above services. The contractor understands that he/she is self employed and must carry at his/her own cost any insurance coverage such as workers compensation, medical, property & liability including auto related to the above mentioned services.

This is a "work for hire" agreement. All rights to materials produced or products from services rendered are property of College of DuPage in perpetuity.

The contractor agrees to hold College of DuPage, its Trustees, officers, directors, agents, successors and assigns harmless from and against all losses, damages, injuries, claims demands, and expenses, including attorneys' fees, which may arise during performance of this agreement.

☒ I have read Board Procedure #15-465 and have determined that the individual on this agreement meets the definition of an independent contractor.


 DEPARTMENT AUTHORIZED SIGNATOR

9/1/18
 DATE

All independent contractors must also certify below regarding the status of any educational loans as required by state law effective January 1, 1988.

(Must Check One)

☒ I certify that I am not in default on an educational loan guaranteed by the State in the amount of \$600.00 or more.

☐ I certify that I am in default on an educational loan guaranteed by the State in the amount of \$600.00 or more and I agree to make arrangements for repayment of this loan with the maker or guarantor within six months from the date of this contract.

I agree with the terms of this agreement and a copy of the contractual agreement.


SIG

DATE

9/1/18

PART II. Complete AFTER performance of contractual services.

Authorized Signator certifies that the contractual services described in Part I above were completed satisfactorily and authorizes payment in full. (Payment is to be made only after completion of the contractual service.)

 9/18/18
 COLLEGE AUTHORIZED SIGNATURE DATE COUNTER SIGNATOR (OPTIONAL) DATE

*See board policy, procedures and instructions on reverse side.
 (This agreement is VOID if amount exceeds \$5,000.00)

Original forward to Accounts Payable; Blue, Purchasing Dept.; Yellow, Signator; Pink, Contractor

Information:

Drawer: Accounts Payable - Invoices
Number: **** FERPA Redaction ****
Name: **** FERPA Redaction ****
Invoice Number: C088041
Invoice Date:
PO Number:
Check Number: 0241748
Check Amount: \$ 760.00
Check Date: 10/17/2018
Voucher Number: V0533817
AP Type: IM Invoices < \$15,000
Redaction Type: FERPA
Document Type: Independent Contractor Agreement

Document Below
Note: Parts of the image below may have been redacted

VENDOR NUMBER

AGREEMENT
NUMBER:

C088041

ACCOUNT NUMBER/AMOUNT

FUND	FUNCTION	DEPARTMENT	OBJECT	AMOUNT
			01-30-12031-5302001	
				300.00
APPROVED-Supervisor, Purchasing				DATE
				/ /

*** Independent Contractor Agreement**

V0533817

(Not to be used for contracts in excess of \$5,000.00)

STUDENT W-9 8/31/18 CHK

PART I. Complete PRIOR to performance of contractual services.

Agrees to perform on

8/31/18
DATE(S)

the following services for the College of DuPage:

3 matches @ 100.00

Women's Volleyball Official Chaparral Invite 8/31/18

If additional space is needed, please continue description of services on separate pages and attach to this form.

The sum of \$ **300.00** will be paid to the independent contractor upon completion of the services. The contractor will be responsible for all taxes related to income from the above services. The contractor understands that he/she is self employed and must carry at his/her own cost any insurance coverage such as workers compensation, medical, property & liability including auto related to the above mentioned services.

This is a "work for hire" agreement. All rights to materials produced or products from services rendered are property of College of DuPage in perpetuity.

The contractor agrees to hold College of DuPage, its Trustees, officers, directors, agents, successors and assigns, harmless from and against all losses, damages, injuries, claims demands, and expenses, including attorneys' fees, which may arise during performance of this agreement.

☒ I have read Board Procedure #15-465 and have determined that the individual on this agreement meets the definition of an independent contractor.

DEPARTMENT AUTHORIZED SIGNATOR

9/18/18
DATE

All independent contractors must also certify below regarding the status of any educational loans as required by state law effective January 1, 1988.
(Must Check One)

☒ I certify that I am not in default on an educational loan guaranteed by the State in the amount of \$600.00 or more.

☐ I certify that I am in default on an educational loan guaranteed by the State in the amount of \$600.00 or more and I agree to make arrangements for repayment of this loan with the maker or guarantor within six months from the date of this contract.

I agree with the terms stated above and certify that I have received a copy of the contractual agreement.

SIGNATURE OF INDEPENDENT CONTRACTOR

DATE

PART II. Complete AFTER performance of contractual services.

Authorized Signator certifies that the contractual services described in Part I above were completed satisfactorily and authorizes payment in full.
(Payment is to be made only after completion of the contractual service.)

COLLEGE AUTHORIZED SIGNATURE

DATE

COUNTER SIGNATOR (OPTIONAL)

DATE

*See board policy, procedures and instructions on reverse side.
(This agreement is VOID if amount exceeds \$5,000.00)

Original forward to Accounts Payable; Blue, Purchasing Dept.; Yellow, Signator; Pink, Contractor

Information:

Drawer: Accounts Payable - Invoices

Number: **** FERPA Redaction ****

Name: **** FERPA Redaction ****

Invoice Number: C090042

Invoice Date:

PO Number:

Check Number: 0241748

Check Amount: \$ 760.00

Check Date: 10/17/2018

Voucher Number: V0535028

AP Type: IM Invoices < \$15,000

Redaction Type: FERPA

Document Type: Independent Contractor Agreement

Document Below

Note: Parts of the image below may have been redacted

* Independent Contractor Agreement

(Not to be used for contracts in excess of \$5,000.00)

V0535028

STUDENT W-9 10/4/18

CHK

VENDOR NUMBER		AGREEMENT NUMBER: C090042		
ACCOUNT NUMBER/AMOUNT				
FUND	FUNCTION	DEPARTMENT	OBJECT	AMOUNT
	01-30	12031-53	02001	130.00
APPROVED-Supervisor, Purchasing				DATE
				/ /

PART I. Complete PRIOR to performance of contractual services.

Agrees to perform on 10/4/18 the following services for the College of DuPage:

Women's Volleyball official 10/4/18 COD vs. Waukegan

Email: [REDACTED]

If additional space is needed, please continue description of services on separate pages and attach to this form.

The sum of \$ 130.00 will be paid to the independent contractor upon completion of the services. The contractor will be responsible for all taxes related to income from the above services. The contractor understands that he/she is self employed and must carry at his/her own cost any insurance coverage such as workers compensation, medical, property & liability including auto related to the above mentioned services.

This is a "work for hire" agreement. All rights to materials produced or products from services rendered are property of College of DuPage in perpetuity.

The contractor agrees to hold College of DuPage, its Trustees, officers, directors, agents, successors and assigns, harmless from and against all losses, damages, injuries, claims demands, and expenses, including attorneys' fees, which may arise during performance of this agreement.

☒ I have read Board Procedure #15-465 and have determined that the individual on this agreement meets the definition of an independent contractor.


DEPARTMENT AUTHORIZED SIGNATOR

10/9/18
DATE

All independent contractors must also certify below regarding the status of any educational loans as required by state law effective January 1, 1988.

(Must Check One)

☒ I certify that I am not in default on an educational loan guaranteed by the State in the amount of \$600.00 or more.

☐ I certify that I am in default on an educational loan guaranteed by the State in the amount of \$600.00 or more and I agree to make arrangements for repayment of this loan with the maker or guarantor within six months from the date of this contract.

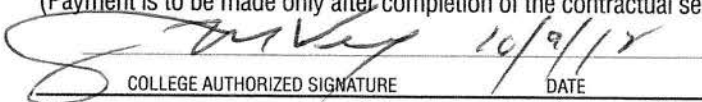
I agree with the terms stated above and certify that I have received a copy of the contractual agreement.

SIGNATURE OF INDEPENDENT CONTRACTOR

10/4/18
DATE

PART II. Complete AFTER performance of contractual services.

Authorized Signator certifies that the contractual services described in Part I above were completed satisfactorily and authorizes payment in full. (Payment is to be made only after completion of the contractual service.)


COLLEGE AUTHORIZED SIGNATURE

10/9/18
DATE

COUNTER SIGNATOR (OPTIONAL)

DATE

*See board policy, procedures and instructions on reverse side.
(This agreement is VOID if amount exceeds \$5,000.00)

Original forward to Accounts Payable; Blue, Purchasing Dept.; Yellow, Signator; Pink, Contractor

From: marekr@cod.edu
Sent: Tue Oct 16 18:44:46 CDT 2018
To: invoicing@cod.edu
CC:
Subject: FW: Scanned from a Xerox Multifunction Device

Bobby Marek Accounts Payable Team Leader Cash Disbursements/Payroll Department College of DuPage
425 Fawell Blvd l SRC 2132 l Glen Ellyn, IL 60137-6599 phone 630-942-2229 l marekr@cod.edu
-----Original Message----- From: marekr@cod.edu Sent: Tuesday, October 16, 2018 6:40 PM To: Marek, Robert Subject: Scanned from a Xerox Multifunction Device Please open the attached document. It was scanned and sent to you using a Xerox Multifunction Device. Attachment File Type: pdf, Multi-Page Multifunction Printer Location: SRC-3 Device Name: Printer-266

[attachment: Scanned from a Xerox Multifunction Printer.pdf]