

Information:

Drawer: Accounts Payable - Invoices  
Vendor Number: 1085802  
Vendor Name: Hilton Lisle/Naperville  
Invoice Number: 51942  
Invoice Date: 10/24/18  
PO Number:  
Check Number: E0070159  
Check Amount: \$ 105.45  
Check Date: 11/07/2018  
Department ID: 11601  
Reviewer Name: None  
Voucher Number: V0540390  
Redaction Type: None  
Document Type: AP Invoice

Document Below

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From: Nicole.Thomason@Hilton.com  
Sent: Wed Oct 24 12:02:30 CDT 2018  
To: invoicing@cod.edu  
CC:  
Subject: Hilton invoice 51942  
-----

Hello,

Please see attached Hilton invoice 51942.  
Thank you and have a wonderful day ☺

Regards,

**Nicole Thomason**  
**Accounts Receivable Manager**  
**Hilton Lisle/Naperville**  
3003 Corporate West Drive  
Lisle, IL 60532  
Phn: 630-245-7634  
Fax: 630-505-8948

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**APPROVED**

HILTON Lisle/NAPERVILLE

3003 Corporate West Drive | Lisle, IL | 60532

T: 630 505 0900 | F: 630 245 7647

W: hilton.com

NAME AND ADDRESS:

**10/31/18 - ELLEN MCGOWAN**

ORIGINAL

COLLEGE DUPAGE-HOPPER, JOSEPH

Attn: ELLEN/ACCTS PAYABLE

COD

425 FAWELL BLVD

GLEN ELLYN IL 60137

UNITED STATES OF AMERICA

Page: 1

INVOICE#

51942

INVOICE DATE

10/24/2018

CURRENT DATE

10/24/2018

YOUR ACCOUNT #

C2489

YOUR P/O #

**Hilton**

DATE	Folio #	AR TRANS	DESCRIPTION	AMOUNT
10/20/2018	850137 B	402368	Rm 321 [RTD FR YOUSSEF, BASSEM:RCPT B]	\$105.45

W  
WALDORF  
ASTORIA  
HOTELS & RESORTS

CONRAD  
HOTEL & RESORTS

canopy  
BY HILTON

Hilton  
HOTELS & RESORTS

CURIO  
A COLLECTION BY HILTON

DOUBLETREE  
BY HILTON

TAPESTRY  
COLLECTION  
BY HILTON

EMBASSY  
SUITES  
BY HILTON

Hilton  
Garden  
Inn

Hampton  
BY HILTON

tru  
BY HILTON

HOMWOOD  
SUITES  
BY HILTON

HOME2  
SUITES BY HILTON

Hilton  
Grand Vacations

Send all Payments to  
Hilton Lisle/Naperville  
3003 Corporate West Drive  
Lisle, IL. 60532

PAYMENT DUE UPON RECEIPT

Total: **\$105.45**

QUESTIONS CONCERNING THIS INVOICE?

CALL: NICOLE THOMASON

630-245-7634

PLEASE RETURN ONE COPY OF INVOICE WITH PAYMENT

**Hilton**  
HONORS

**NAME AND ADDRESS:**

COLLEGE DUPAGE-HOPPER, JOSEPH  
ATTN: ELLEN/ACCTS PAYABLE  
COD  
425 FAWELL BLVD  
GLEN ELLYN IL 60137  
UNITED STATES OF AMERICA

Room: 321/K1  
Arrival Date: 10/19/2018 12:08:00 PM  
Departure Date: 10/20/2018 5:16:00 AM

Adult/Child: 1/0  
Room Rate: 95.00

Rate Plan: RCBY  
HH #: 970330343 SILVER  
AL:  
Car:

Confirmation Number: 3493431007

YOUSSEF, BASSEM  
10/24/2018

**Hilton**

DATE	REFERENCE	DESCRIPTION	AMOUNT
10/19/2018	4022829	GUEST ROOM	\$95.00
10/19/2018	4022829	STATE TAX	\$5.70
10/19/2018	4022829	LOCAL TAX	\$4.75
10/20/2018	4023070	Direct Bill - COLLEGE DUPAGE-HOPPER, JOSEPH	(\$105.45)
		**BALANCE**	\$0.00

**W**  
WALDORF  
ASTORIA  
HOTELS & RESORTS

**CONRAD**  
HOTELS & RESORTS

**canopy**  
BY HILTON

**Hilton**  
HOTELS & RESORTS

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**Hampton**  
BY HILTON

**tru**  
BY HILTON

**HOMESWOOD**  
SUITES  
BY HILTON

**HOME2**  
SUITES BY HILTON

**Hilton**  
Grand Vacations

**Hilton**  
HONORS

ACCOUNT NO.

DATE OF CHARGE

FOLIO NO./CHECK NO.

850137 B

CARD MEMBER NAME

AUTHORIZATION

INITIAL

ESTABLISHMENT NO. & LOCATION

ESTABLISHMENT AGREES TO TRANSMIT TO CARD HOLDER FOR PAYMENT

I AGREE THAT MY LIABILITY FOR THIS BILL IS NOT WAIVED AND  
AGREE TO BE HELD PERSONALLY LIABLE IN THE EVENT THAT  
THE INDICATED PERSON, COMPANY OR ASSOCIATION FAILS TO  
PAY FOR ANY PART OR THE FULL AMOUNT OF THESE CHARGES.

PURCHASES & SERVICES

TAXES

TIPS & MISC.

CARD MEMBER'S SIGNATURE

TOTAL AMOUNT

-105.45

MERCHANDISE AND/OR SERVICES PURCHASED ON THIS CARD SHALL NOT BE RESOLD OR RETURNED FOR A CASH REFUND.

PAYMENT DUE UPON RECEIPT