

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1562023
Vendor Name: Tyco Fire & Security (US) Mana
Invoice Number: 20257525
Invoice Date: 06/01/18
PO Number: P0361036
Check Number: E0070204
Check Amount: \$ 982.06
Check Date: 11/07/2018
Department ID: 00705
Reviewer Name: Kathy Striplin
Voucher Number: V0538663
Redaction Type: None
Document Type: AP Invoice

Document Below



D-U-N-S 09-4738007
FED. ID 58-2608861

District # 311
91 N Mitchell Ct
ADDISON, IL 60101-5608
630-948-1100

Bill To: 311-00837665

College Of Du Page
425 Fawell Blvd
Engineering Dept
GLEN ELLYN IL 60137-6708

Johnson Controls Fire Protection LP

INVOICE NO.

20257525

INVOICE DATE

06-01-18

CUSTOMER PO

CONTRACT #

290491

MODIFIER

R06-MAR-2018

PAYMENT TERMS

Net 60

Ship To: 311-14791466

College Of Du Page
425 Fawell Blvd
Business Office
GLEN ELLYN IL 60137-6708

APPROVED
10/30/18 - BRUCE SCHMIEDL

Requestors Name: Shiela,

CONTRACT DESCRIPTION

CONTRACT
START DATE

CONTRACT
END DATE

COLLEGE OF DU PAGE-BUSINESS OFFICE-14791466

01-JUL-18

30-JUN-19

INVOICE NOTES:

This is your annual invoice for time clock services at the location: College Of Du Page, 425 Fawell Blvd, Business Office, Glen Ellyn Dupage IL 60137-6708.

INVOICE REVIEWED
OKAY TO PAY

Total Contract Amount	\$982.06	Amount Of Current Invoice -	\$982.06
		Sales Tax	\$0.00
		Total Amount Included	\$982.06
		Payment Received	\$0.00

KATHY STRIPLIN 10/30/18

Total Amount Due **\$982.06**

REMITTANCE COPY



PLEASE TEAR OFF AND RETURN THIS PORTION WITH YOUR PAYMENT - WRITE INVOICE NO. ON YOUR CHECK.

TOTAL AMOUNT DUE

982.06

BILL TO College Of Du Page
311-00837665

SHIP TO College Of Du Page
311-14791466

INVOICE NUMBER 20257525

INVOICE DATE 06-01-18

CUSTOMER P.O.

REMIT TO Johnson Controls Fire Protection LP
Dept. CH 10320
Palatine, IL 60055-0320

7000098206420257525



District # 311
91 N Mitchell Ct
ADDISON, IL 60101-5608
630-948-1100

Johnson Controls Fire Protection LP

INVOICE NO.

20257525

DATE OF INVOICE

06-01-18

INVOICE CONTRACT DETAIL

Service Plan Name	Billing Start Date	Billing End Date	Ship To Address	Covered Product	Qty	Description	Amount
Time Solutions High End Test & Inspect - Parts and Labor	01-JUL-18	30-JUN-19	425 Fawell Blvd, Business Office, GLEN ELLYN, IL	SYSTEM-EH-HIGH END CLOCK 1403-9110 S/N B33007 1403-9110 S/N B00870	1 1 1	TIME CLOCK (HIGH END) SYSTEM CENTENNIAL 120V CENTENNIAL 120V	\$982.06

PREPRINT

Request for Taxpayer Identification Number and Certification

Give Form to the
requester. Do not
send to the IRS.

► Go to www.irs.gov/FormW9 for instructions and the latest information.

Print or type.
See Specific Instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.

TYCO FIRE & SECURITY (US) MANAGEMENT INC

2 Business name/disregarded entity name, if different from above

JOHNSON CONTROLS FIRE PROTECTION LP (FEIN 58-2608861 FKA SIMPLEXGRINNELL LP)

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only **one** of the following seven boxes.

☐ Individual/sole proprietor or single-member LLC ☒ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estate

☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ►

Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is **not** disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.

☐ Other (see instructions) ►

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any) **5**

Exemption from FATCA reporting code (if any) **E**

(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions.

4700 EXCHANGE COURT, SUITE 300

6 City, state, and ZIP code

BOCA RATON FL 33431

7 List account number(s) here (optional)

Requester's name and address (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number

- -

or

Employer identification number

8 0 - 0 7 0 6 0 6 7

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign
Here

Signature of
U.S. person

Date

2/16/2018

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

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)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

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, later.

Appendix to W-9 Filing

Johnson Controls Fire Protection LP

Please note that Johnson Controls Fire Protection LP is a valid legal entity with all the rights, privileges and powers available to it under the Laws of Delaware and those jurisdictions where it is qualified with the Secretary of State (i.e. ability to conduct business in its own name, sign and enforce contracts, hold bank accounts, etc.). This entity was formerly known as SimplexGrinnell LP and changed its name to Johnson Controls Fire Protection LP as part of a business rebranding effort. As Johnson Controls Fire Protection LP is owned by multiple "single member" LLCs that are disregarded for income tax purposes, the Internal Revenue Service (IRS) treats Johnson Controls Fire Protection LP as a disregarded entity (a division of its corporate parent company) for income tax purposes in accordance with "check-the-box" regulations. Based on this classification, the IRS requires that we state (on all W-9 forms) the name and federal employer identification number (FEIN) of our corporate parent company that will actually be filing the federal income tax returns. This occurs even though the legal entity that you are dealing with is Johnson Controls Fire Protection LP. The corporate parent company information is supplied to you on the first line and in Part 1 of the attached W-9, with Johnson Controls Fire Protection LP being listed on the second line (as directed by the IRS). For cross reference purposes within your AP systems, we have also listed Johnson Controls Fire Protection LP's historical FEIN (58-2608861) on line 2 of the W-9.

EFFECT OF THIS W-9

Since the parent entity of Johnson Controls Fire Protection LP is a valid (SubChapter C) corporation, the W-9 certification operates to justify your reporting treatment as follows:

1. Payments made to Johnson Controls Fire Protection LP are NOT subject to 1099 reporting;
2. Payments made to Johnson Controls Fire Protection LP are NOT subject to IRS Back-Up Withholding; and
3. Payments made to Johnson Controls Fire Protection LP are NOT subject to FATCA reporting.

Please note that the address listed on the W-9 represents the formal location of our organization's books and records. However, this W-9 certification applies equally to ALL operational addresses/offices maintained by Johnson Controls Fire Protection LP.

From: marekr@cod.edu
Sent: Fri Oct 19 10:23:47 CDT 2018
To: invoicing@cod.edu
CC:
Subject: FW: College Of Du Page - 837665

Bobby Marek
Accounts Payable Team Leader
Cash Disbursements/Payroll Department
College of DuPage
425 Fawell Blvd | SRC 2132 | Glen Ellyn, IL 60137-6599
phone 630-942-2229 | marekr@cod.edu

From: Johnson Controls Fire Protection <simplexgrinnell@client-relations.com >
Sent: Friday, October 19, 2018 10:20 AM
To: Invoicing <invoicing@cod.edu>; Marek, Robert <marekr@cod.edu>
Subject: College Of Du Page - 837665
Importance: High

Hello Robert,

Attached is the invoice and W-9 you requested.

We appreciate your payment as soon as possible to the bank details mentioned on the invoice or you can pay on line with a credit card at www.simplexgrinnellpayonline.com .

Please let us know if there is anything you may need from our end to facilitate the processing of this invoice.

Thank you,

Melody
Phone Number: 866-876-2903
Fax Number: 877-630-6459

10/19/2018 11:19:43 AM

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