

Information:

Drawer: Accounts Payable - Invoices  
Vendor Number: 1085802  
Vendor Name: Hilton Lisle/Naperville  
Invoice Number: 51979  
Invoice Date: 11/14/18  
PO Number: P0360509  
Check Number: E0070594  
Check Amount: \$ 632.70  
Check Date: 11/28/2018  
Department ID: 11601  
Reviewer Name: None  
Voucher Number: V0542605  
Redaction Type: None  
Document Type: AP Invoice

Document Below

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From: Nicole.Thomason@Hilton.com  
Sent: Wed Nov 14 11:30:59 CST 2018  
To: invoicing@cod.edu  
CC:  
Subject: Hilton invoice 51979  
-----

Hello,

Please see attached Hilton invoice 51979.  
Thank you and have a great 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**

**11/21/18 - 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# 51979  
INVOICE DATE 11/14/2018  
CURRENT DATE 11/14/2018  
YOUR ACCOUNT # C2489  
YOUR P/O #



WALDORF  
ASTORIA  
HOTELS & RESORTS

CONRAD  
HOTELS & 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

HOMER  
BY HILTON

Hilton  
Grand Vacations

**Hilton**  
HONORS

DATE	Folio #	AR TRANS	DESCRIPTION	AMOUNT
11/11/2018	854026 B	403666	Rm 329 [RTD FR BECKER, KYLE:RCPT B]	\$210.90
11/11/2018	854027 B	403666	Rm 332 [RTD FR FALCO, MADELINE:RCPT B]	\$210.90
11/11/2018	854028 B	403667	Rm 335 [RTD FR KIDWELL, JESSICA:RCPT B]	\$210.90

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

PAYMENT DUE UPON RECEIPT

Total: \$632.70

QUESTIONS CONCERNING THIS INVOICE?  
CALL: NICOLE THOMASON  
630-245-7634

PLEASE RETURN ONE COPY OF INVOICE WITH PAYMENT

NAME AND ADDRESS:

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

Room: 329/D2  
 Arrival Date: 11/8/2018 5:49:00 PM  
 Departure Date: 11/11/2018 12:35:00 PM

Adult/Child: 2/0  
 Room Rate: 95.00

Rate Plan: RCPC  
 HH #  
 AL:  
 Car:

Confirmation Number: 3501714821

BECKER, KYLE

11/14/2018

# Hilton

DATE	REFERENCE	DESCRIPTION	AMOUNT
11/8/2018	4035186	GUEST ROOM	\$95.00
11/8/2018	4035186	STATE TAX	\$5.70
11/8/2018	4035186	LOCAL TAX	\$4.75
11/9/2018	4035783	GUEST ROOM	\$95.00
11/9/2018	4035783	STATE TAX	\$5.70
11/9/2018	4035783	LOCAL TAX	\$4.75
11/11/2018	4036478	Direct Bill - COLLEGE DUPAGE-HOPPER, JOSEPH	(\$210.90)
		**BALANCE**	\$0.00

W  
 WALDORF  
 ASTORIA  
 HOTELS & RESORTS

CONRAD  
 HOTELS & RESORTS

canopy  
 BY HILTON

Hilton  
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 A COLLECTION BY HILTON

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 BY HILTON

TAPESTRY  
 COLLECTION  
 BY HILTON

EMBASSY  
 SUITES  
 BY HILTON

Hilton  
 Garden  
 Inn

Hampton  
 BY HILTON

tru  
 BY HILTON

HOMWOOD  
 SUITES  
 BY HILTON

HOMER  
 SUITES  
 BY HILTON

Hilton  
 Grand Vacations

Hilton  
 HONORS

ACCOUNT NO.

DATE OF CHARGE

FOLIO NO./CHECK NO.

854026 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.

TOTAL AMOUNT

-210.90

CARD MEMBER'S SIGNATURE

PAYMENT DUE UPON RECEIPT

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



HILTON LISLE NAPERVILLE  
3003 Corporate West Drive | Lisle, IL | 60532  
T: 630 505 0900 | F: 630 245 7647  
W: hilton.com

NAME AND ADDRESS:

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

Room: 332/D2  
Arrival Date: 11/8/2018 5:49:00 PM  
Departure Date: 11/11/2018 12:35:00 PM

Adult/Child: 2/0  
Room Rate: 95.00

Rate Plan: RCPC  
HH #  
AL:  
Car:

Confirmation Number: 3499721870

FALCO, MADELINE

11/14/2018

Hilton

DATE	REFERENCE	DESCRIPTION	AMOUNT
11/8/2018	4035188	GUEST ROOM	\$95.00
11/8/2018	4035188	STATE TAX	\$5.70
11/8/2018	4035188	LOCAL TAX	\$4.75
11/9/2018	4035784	GUEST ROOM	\$95.00
11/9/2018	4035784	STATE TAX	\$5.70
11/9/2018	4035784	LOCAL TAX	\$4.75
11/11/2018	4036479	Direct Bill - COLLEGE DUPAGE-HOPPER, JOSEPH	(\$210.90)
		**BALANCE**	\$0.00

W  
WALDORF  
ASTORIA  
HOTELS & RESORTS

CONRAD  
HOTELS & 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

HOMEWOOD  
SUITES  
by hilton

HOME2  
by hilton

Hilton  
Grand Vacations

Hilton  
HONORS

ACCOUNT NO.

DATE OF CHARGE

FOLIO NO./CHECK NO.

854027 B

CARD MEMBER NAME

AUTHORIZATION

INITIAL

ESTABLISHMENT NO. & LOCATION

ESTABLISHMENT AGREES TO TRANSFER TO CARD HOLDER FOR PAYMENT

PURCHASES & SERVICES

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

TAXES

TIPS & MISC.

CARD MEMBER'S SIGNATURE

TOTAL AMOUNT

-210.90

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

PAYMENT DUE UPON RECEIPT

NAME AND ADDRESS:

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

Room: 335/D2  
 Arrival Date: 11/8/2018 5:45:00 PM  
 Departure Date: 11/11/2018 12:36:00 PM

Adult/Child: 2/0  
 Room Rate: 95.00

Rate Plan: RCPC  
 HH #  
 AL:  
 Car:

Confirmation Number: 3499669735

KIDWELL, JESSICA  
 11/14/2018



DATE	REFERENCE	DESCRIPTION	AMOUNT
11/8/2018	4035191	GUEST ROOM	\$95.00
11/8/2018	4035191	STATE TAX	\$5.70
11/8/2018	4035191	LOCAL TAX	\$4.75
11/9/2018	4035785	GUEST ROOM	\$95.00
11/9/2018	4035785	STATE TAX	\$5.70
11/9/2018	4035785	LOCAL TAX	\$4.75
11/11/2018	4036480	Direct Bill - COLLEGE DUPAGE-HOPPER, JOSEPH	(\$210.90)
		**BALANCE**	\$0.00



WALDORF  
ASTORIA  
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CONRAD  
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by hilton



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EMBASSY  
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Hilton  
Garden  
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by hilton



tru  
by hilton

HOMWOOD  
SUITES  
by hilton

HOME2  
by hilton



Hilton  
Grand Vacations



Hilton  
HONORS

ACCOUNT NO.

DATE OF CHARGE

FOLIO NO./CHECK NO.

854028 B

CARD MEMBER NAME

AUTHORIZATION

INITIAL

ESTABLISHMENT NO. & LOCATION

ESTABLISHMENT AGREES TO TRANSFER 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.

TOTAL AMOUNT

-210.90

CARD MEMBER'S SIGNATURE

PAYMENT DUE UPON RECEIPT

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