

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 0782260

Vendor Name: Ms Christine M. Fenne

Invoice Number: 041420

Invoice Date: 04/14/20

PO Number:

Check Number: 0267836

Check Amount: \$ 760.60

Check Date: 05/12/2020

Department ID: 00813

Reviewer Name:

Voucher Number: V0618115

Redaction Type: None

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

Document Below

From: carrilloe42@cod.edu
Sent: Mon Jan 27 14:57:00 CST 2020
To: invoicing@cod.edu
CC:
Subject: Please pay - Vice Chairman Fenne Reimbursement

Please call me when the check is ready.

If you need any additional information, please contact me – DO NOT contact Vice Chairman Fenne.

Erin Carrillo
Office of the President



425 Fawell Blvd.
SRC-2135
Glen Ellyn, IL 60137
(630) 942-2203 – office
(630) 942-2869 – fax

carrilloe42@cod.edu

FINAN-15-18226(2/15)

From: zerrudom@cod.edu
Sent: Tue Apr 14 14:12:40 CDT 2020
To: invoicing@cod.edu
CC:
Subject: FW: Trustee Christine Fenne Reimbursements

From: Carrillo, Erin
Sent: Tuesday, April 14, 2020 2:10 PM
To: Zerrudo, Maria <zerrudom@cod.edu>
Subject: Re: Trustee Christine Fenne Reimbursements

Yes. I will let the trustee know.

Are you able to provide a scanned copy?

From: Zerrudo, Maria
Sent: Tuesday, April 14, 2020 2:08 PM
To: Carrillo, Erin
Subject: RE: Trustee Christine Fenne Reimbursements

Hi Erin,

The check will be cut on our next check run next month.
Since we are all working remotely, we will mail the check to the address provided.
Are you ok with that?

Thanks
Marivic

From: Carrillo, Erin
Sent: Tuesday, April 14, 2020 1:49 PM
To: Zerrudo, Maria <zerrudom@cod.edu>
Subject: Re: Trustee Christine Fenne Reimbursements

1923 Sherwood Place, Wheaton, IL 60189

From: Zerrudo, Maria
Sent: Tuesday, April 14, 2020 1:22 PM
To: Carrillo, Erin
Subject: RE: Trustee Christine Fenne Reimbursements

Erin,

Please provide her address. Want to be we are paying the right person.

Thanks

Marivic

From: Carrillo, Erin

Sent: Tuesday, April 14, 2020 11:56 AM

To: Zerrudo, Maria <zerrudom@cod.edu>

Subject: Trustee Christine Fenne Reimbursements

Trustee Christine Fenne's information has been updated in the system (according to Katherine Norris of Records).

Please move forward with her reimbursement.

If you need any further information from me, please let me know.

Thanks.

**COLLEGE of DuPAGE
REGULAR BOARD MEETING**

BOARD APPROVAL

1. SUBJECT

Approval of reimbursement request for Vice Chairman Christine Fenne.

2. REASON FOR CONSIDERATION

Pursuant to Board Policy No. 5-200, "Trustees may be reimbursed for travel, meal, and lodging expenses incurred in connection with 'official business.'... for the purpose of furthering the College's mission and/or conducting the Board's business"; having received "Approval of the Board by roll call vote at a public meeting ... in advance of attending professional conferences", in accordance with Board Policy 5-195.

3. BACKGROUND INFORMATION

On June 20, 2019, Vice Chairman Christine Fenne was granted Board approval to attend the Association of Community College Trustees (ACCT), National Leadership Congress in San Francisco, CA, October 16-19, 2019 and for the College of DuPage to reimburse allowable expenses up to \$1,500.00. Vice Chairman Fenne has submitted expense reimbursement requests, copies of which are submitted with the present resolution. Those requests have been reviewed. The Board is being asked to approve the permitted expenses.

4. RECOMMENDATION

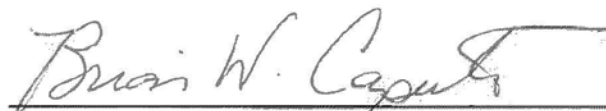
That the Board of Trustees authorizes the reimbursement to Vice Chairman Christine Fenne in the following amount for the expense report submitted: \$760.60.


SIGNATURE PAGE

Reimbursable Expenses for Vice Chairman Christine Fenne

ITEM(S) ON REQUEST:

That the Board of Trustees authorizes the reimbursement to Vice Chairman Christine Fenne in the following amount for the expense report submitted: \$760.60.


Dr. Brian Caputo, President
1/16/20
Date


Secretary Markwell
1/16/2020
Date


Chairman
1/16/20

COLLEGE OF DuPAGE
SPECIAL BOARD MEETING

BOARD APPROVAL

1. SUBJECT

Approval for Board Chairman, Frank Napolitano and Board Vice Chairman, to attend the Association of Community College Trustees, (ACCT), Leadership Congress in San Francisco, CA, October 16-19, 2019; and for the College of DuPage to reimburse allowable expenses up to \$1,500.00 per Trustee.

2. REASON FOR CONSIDERATION

In accordance with provisions of Board Policy 5-195, Trustee Education and Attendance at Conferences, Board approval is required.

3. BACKGROUND INFORMATION

The College has been active in the organization over the years. In 2016 and 2017 Chairman Napolitano was appointed to the Public Policy and Advocacy Committee. In addition, Chairman Napolitano was invited to present with COD Team at the 2017 ACCT Conference and Trustee Markwell at the 2018 Conference.

Vice Chairman Fenne and Chairman Napolitano have been invited to present "Frida Kahlo 2020 Cultural Arts as a Catalyst" at this conference with Diana Martinez, Director McAninch Arts Center and Justin Witte, Art Gallery Curator. Note: a Trustee must be a member of the presentation team.

The requested \$3,000.00 will cover the registration for the conference at the early bird rate of \$1095.00 per Trustee. (The early bird rate ends August 9, 2019.) This will also help cover airfare and hotel accommodations. Anything above the \$1,500.00 will be covered at the Trustee's expense

The request complies with Board Policy.

Budget Status

GL Account	FY2019	FY2020		
	YTD Spend	Annual Budget	YTD Spend	Available Balance
01-90-00813-5503005	\$ 2,983	\$ 6,000	\$ -	\$ 6,000
<i>Board of Trustees: Travel-Out of State</i>				
FY2020 Request				<u>\$ 3,000</u>

*FY2020 Budget not yet adopted. YTD Spend as of 06/11/2019

4. **RECOMMENDATION**

That the Board of Trustees approves Board Chairman, Frank Napolitano and Board Vice Chairman Christine Fenne, to attend the Association of Community College Trustees, (ACCT), Leadership Congress in San Francisco, CA October 16-19, 2019; and for College of DuPage to reimburse allowable expenses up to \$1,500.00 per Trustee.

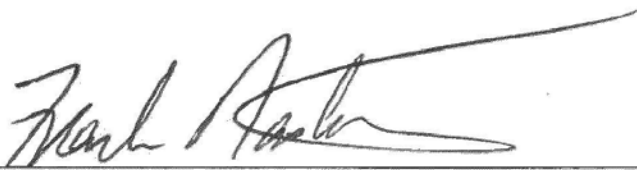
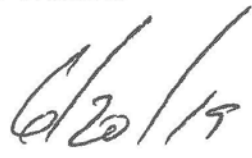
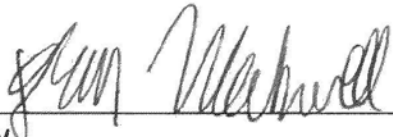
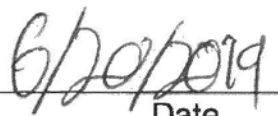
BOARD APPROVAL

SIGNATURE PAGE

Board Chairman and Vice Chairman attend the Association of Community College Trustees, (ACCT), Leadership Congress in San Francisco, CA October 16-19, 2019

ITEM(S) ON REQUEST

That the Board of Trustees approves Board Chairman, Frank Napolitano and Board Vice Chairman Christine Fenne, to attend the Association of Community College Trustees, (ACCT), Leadership Congress in San Francisco, CA October 16-19, 2019; and for College of DuPage to reimburse allowable expenses up to \$1,500.00 per Trustee.

	
Board Chair	Date
	
Board Secretary	Date

Employees requesting reimbursement for expenditures of \$100.00 or greater are required to obtain prior approval via the Pre-Travel Approval/Advance Form regardless if the reimbursement is non-travel related. Employees requesting a travel advance are to submit the approved form to the Manager of Cash Disbursements at least three weeks prior to the trip departure date. Advances will be issued at 90% of the total estimated expenses to be reimbursed. The advanced amount must be \$100.00 or greater but not to exceed \$3,000.00. Exceptions will be reviewed on a case-by-case basis. An employee may only have one outstanding advance at a time.

Date: June 20, 2019

Name: Christine Fenne Colleague ID#: _____ Extension: 2203 Dept. No.: Trustees Board of

A. Name of Professional Meeting or Conference: 2019 ACCT Leadership Congress
Location: San Francisco, CA Date(s): October 16-19, 2019

B. Institutional Business: _____
Destination: _____ Date(s): _____

C. Faculty complete item 1, administrators complete item 2, below.

1. Provisions for classes missed: _____
2. Name of person to whom administrative responsibilities have been delegated: _____

Estimated expense to be reimbursed

Private auto (@ \$0.565 per mile)	_____
Vehicle Rental	_____
Registration Fee	<u>\$800.00</u>
Lodging (See instruction-d)	<u>\$300.00</u>
Meals (See instruction-f)	_____
Airfare	<u>\$500.00</u>
Other (specify)	_____
TOTAL	<u>\$800.00</u>

Estimated expense paid direct by College

(Submit requisitions via Mercury Commerce for PO issuance)

College vehicle	_____
Registration Fee	<u>\$825.00</u>
Lodging	_____
Airfare	_____
Other (specify)	_____
Other (specify)	_____
TOTAL	<u>\$825.00</u>

EMPLOYEE STATEMENT

☐ I REQUEST AN ADVANCE OF 90% OF THE ESTIMATED EXPENSES TO BE REIMBURSED AS SHOWN ABOVE.

(Above box must be checked for Advance to be processed.) DATE ADVANCE WILL BE REQUIRED: _____

By signing this Pre-Travel Approval/Advance Form, the employee acknowledges that he/she understands the Finance Procedures regarding reimbursements and the employee understands that their reimbursable expense report is to be submitted to the Finance Office within 30 days from either the trip return date or the ending date of an event. If multiple events are scheduled (for example Athletic season), reimbursable expense reports are to be submitted within 30 days following each event.

I understand that if I am requesting a Pre-Travel Advance, it is my responsibility to submit a complete reimbursable expense report with appropriate receipts and approvals to the Accounts Payable Department within 30 days of the trip return date or ending date of the event, but no longer than 45 days of the return date or ending date of the event. I hereby authorize a payroll deduction for the amount advanced if my reimbursable expense report is not approved, submitted and received by the Accounts Payable department within the 45-day period as described above.

Christine M. Fenne
Employee Signature _____ Date _____
Approved by: Frank A. To Subsequent account to be charged: 01 - 90 - 00813 - 5502005
(Immediate Supervisor) (Date) Fund Function Dept. Obj. Code
(To be filled in by Budget Officer)

Approved by: _____ (Date)
(Budget Officer) Signature is required if advance is requested.

Approved by: _____ (Date)
(Vice President) Signature required if total expenses are \$500 or greater.

For travel outside the State of Illinois ONLY

Approved by: _____ (Date)
(Vice President or Designee)

For travel outside the Continental United States ONLY

Approved by: _____ (Date)
(President/Board of Trustees)

FOR FINANCE OFFICE USE ONLY:

90% of \$ _____ = \$ _____ (Amount of Advance) 01-00-00000-1309001 (Finance Office Approval) (Date)

INSTRUCTIONS

- I. Employees requesting to be reimbursed for a College related expense must obtain prior approval by their Supervisor as well as the authorized Budget Officer and their Vice President and President (if applicable) for expenditures of \$100.00 or greater. The Pre-Travel Approval/Advance Form is used for this purpose regardless if the expense is or is not related to travel.
 - a. Complete the form in its entirety. Provide detail in Section A (Professional Meetings or Conferences) OR Section B (other Institutional Business.)
 - b. If an advance is requested, be sure to mark the appropriate ☐.
 1. Travel advance checks/ACH deposits are processed in accordance with (1) the published Accounts Payable check schedule and (2) the scheduled travel date.
 2. Airfare, registration fees and lodging deposits will be reimbursed in advance of actual travel when a completed Pre-Travel form and Reimbursable Expense Form is submitted to Accounts Payable. Supporting documentation including an itemization of the charges and proof of payment detailing payment made by the employee must be included.
 3. Airfare, registration fees and lodging deposits can be paid directly in advance by submitting a Requisition via Mercury Commerce for PO issuance to the respective vendor.
 4. For conference/meeting registration fees, a copy of the registration form showing the date(s) of the conference and fees paid must be attached to the Pre-Travel Approval/Advance Form.
 5. Advances not returned to the college or cleared within 45 days of the date of the event will be deducted from the employee's payroll check. Employee has authorized said deduction as attested to the employee's signature on the Pre-Travel Advance Request form.
 - c. Vehicle rentals require the approval of the budget officer(s) in advance of travel.
 - d. Overnight stays in the following Illinois counties require approval in advance of travel by the department Vice President: Cook, DeKalb, DuPage, Grundy, Kane, Kendall, Lake, McHenry and Will.
 - e. No reimbursement for meals or "incidental expenditures" will be made unless an overnight stay is required. Exceptions may apply (for example Forensics or Athletics off-campus events.)
 - f. For a full day of travel away from home where an overnight stay is required, employee meals and incidental expenses will continue to be reimbursed based on a two tier approach and in accordance with the following criteria:
 1. For overnight travel, meals and incidental expenses for the day of departure and the day of return will be limited to 75% of the daily amount allowed by the Internal Revenue Service and communicated by the Finance Office.
 2. Receipts for the first or second tier maximum daily limits are not required and therefore do not have to be submitted with the Reimbursable Expense Form. However, all meals and incidental expenses must be itemized by day on the form.
 3. Incidental expenses are included in the per diem daily limit. Incidental expenses are tips for porters, baggage carriers, bellhops, and hotel maids; beverages and snacks outside of meals; transportation between places of lodging or businesses and places where meals are obtained.
 4. The first tier rate applies to all continental United States locations that are not currently listed at the highest published daily rate for meals and incidental expenses as provided by the Internal Revenue Service. The second tier rate applies to only those locations having the highest published daily rate for meals and incidental expenses in the continental United States. Published second tier locations can be found on Outlook/Public Folders:Information/Administrative Affairs/Financial Affairs & Controller/Mileage/Per Diem Rates.
 - g. Employee retains pink copy.
 - h. Remaining copies are submitted to employee's supervisor.
 - i. Supervisor will have copies approved by Authorized Budget Officer who must provide subsequent GL account to be charged.
Estimated expenses \$500 or greater must be approved by your respective Vice President or Designee.
All out-of-state travel must be approved by your respective Vice President or Designee.
All travel outside the continental United States must be approved by the President/Board of Trustees.
 - j. Authorized Signer will distribute copies as follows:
 1. White — Finance Office-Manager, Cash Disbursements
 2. Yellow — Retain in records of Authorized Signator
 3. Blue — Return to employee (to submit with Reimbursable Expense Form)
 - k. Employees will return the blue copy of form with completed reimbursable expense report within guidelines of institutional policy.
 - l. Airline reservations are to be made through the College Designated Travel Agency. Exceptions must be approved, in advance, by the Vice President, Administrative Affairs. Airline tickets may be purchased with credit card or personal check.
Airline tickets for group travel may be purchased with a Purchase Order.
- II. Employees away from campus on College business with expenses being paid directly by the College (such as use of college owned vehicle, registration fees, airfare, lodging, etc.) should indicate these costs in the "Estimated cost paid direct by College" section of the form. Request vehicle requisition form or vehicle mileage rates from the Purchasing Department. Submit vehicle requisitions to the Purchasing Department directly to secure a reservation.
- III. Employees not away from campus, with estimated reimbursable expenses in excess of \$100.00 are to complete the form as in item I, but write "None" in the space designated for Date or Dates Off Campus.
- IV. Employees away from campus without reimbursable expenses or when reimbursable expenses are estimated at less than \$100.00.
 - a. Complete and sign the form.
 - b. Remove the employee pink copy and retain for records.
 - c. Forward remaining copies to employee's supervisor.
 - d. Supervisor will have copies signed by authorized signer, if approved.
 - e. Authorized signer will distribute copies as follows:
 1. Yellow — Retain in records of Authorized Signator
 2. Blue — Return to employee as confirmation of action

Carrillo, Erin

From: GLI <GLI@acct.org>
Sent: Monday, July 1, 2019 3:06 PM
To: BOT
Subject: 2019 New Trustee Governance Leadership Institute Attendee Registration Confirmation

*****WARNING: E-MAIL MAY BE FROM AN OUTSIDE DOMAIN.*****



Thank you for registering for the 2019 New Trustee Governance Leadership Institute! This Institute is taking place August 8th to the 10th in Washington DC at The Darcy Hotel located at 1515 Rhode Island Ave NW, Washington, DC 20005. To reserve your hotel room at the ACCT group rate of \$175/night, please [click here](#).

If you have any questions, please contact Norma Goldstein at ngoldstein@acct.org.

Thank you very much, and we look forward to seeing you this summer in Washington DC!

Sincerely,

Christina Simons
ACCT Director of Educational Events

Your Registration Information:

Dr. Maureen Dunne
Trustee
College of DuPage
425 Fawell Blvd.
Glen Ellyn, IL 60137

Customer	Qty	Item	Price	Discount	Taxes	Shipping	Sub-Total	Paid	Balance
Dunne Maureen	1.0000	2019 New Trustee Governance Leadership Institute	650.00	0.00	0.00	0.00	650.00	650.00	0.00

Invoice #	Date	Event/Session	Amount Due	Amount Paid
72879	07/01/19	2019 New Trustee Governance Leadership Institute	\$650.00	\$650.00

For detailed information and print your invoice or receipt, please [log in](#) to your account.

All registration cancellations and refund requests must be made by August 1, 2019. A refund of all fees will be given for cancellations received by that date.

Submit all requests to ACCT via email at csimons@acct.org. Refunds will not be given for no-shows.

A transfer of your full registration is permitted prior to the event by submitting a written request to csimons@acct.org. Onsite transfers must be accompanied by proof of the original confirmation letter. The individual submitting the transfer request is responsible for all financial obligations (any balance due) associated with that substitution.

eTicket Itinerary and Receipt for Confirmation NRH025

1 message

United Airlines, Inc. <Receipts@united.com>

Sun, Sep 29, 2019 at 7:12 PM



Sun, Sep 29, 2019

Thank you for choosing **United**.

A receipt of your purchase is shown below. Please retain this email receipt for your records.

Confirmation Number:

NRH025

Flight 1 of 2 UA769

Class: Economy (S)

Thu, Oct 17, 2019

Thu, Oct 17, 2019

09:15 AM

11:59 AM

Chicago, IL, US (ORD)

San Francisco, CA, US (SFO)

Flight 2 of 2 UA208

Class: Economy (W)

Fri, Oct 18, 2019

Fri, Oct 18, 2019

02:00 PM

08:20 PM

San Francisco, CA, US (SFO)

Chicago, IL, US (ORD)

Traveler Details

FENNE/CHRISTINEM

eTicket number: [REDACTED]

Seats: ORD-SFO 24B

SFO-ORD 27B

Purchase Summary

Method of payment: [REDACTED]

Discounted in 5014

Airfare:
U.S. Transportation Tax:
U.S. Flight Segment Tax:
September 11th Security Fee:

476.27 USD
35.73 USD
8.40 USD
11.20 USD

U.S. Passenger Facility Charge:

9.00 USD

Total Per Passenger:

540.60 USD

Total:

540.60 USD

Fare Rules

Additional charges may apply for changes in addition to any fare rules listed.

NONREF/0VALUAFTDPT/CHGFEE

Cancel reservations before the scheduled departure time or TICKET HAS NO VALUE.

Baggage allowance and charges for this itinerary

Origin and destination for checked baggage	1st bag charge	2nd bag charge	1st bag weight and dimensions	2nd bag weight and dimensions
Thu, Oct 17, 2019 Chicago, IL, US (ORD - O'Hare) to San Francisco, CA, US (SFO)	30 USD	40 USD	50lbs(23kg) - 62in(157cm)	50lbs(23kg) - 62in(157cm)
Fri, Oct 18, 2019 San Francisco, CA, US (SFO) to Chicago, IL, US (ORD - O'Hare)	30 USD	40 USD	50lbs(23kg) - 62in(157cm)	50lbs(23kg) - 62in(157cm)

Important Information about MileagePlus Earning

Accruals vary based on the terms and conditions of the traveler's frequent flyer program, the traveler's frequent flyer status and the itinerary selected. United MileagePlus® mileage accrual is subject to the rules of the MileagePlus program

Once travel has started, accruals will no longer display. You can view your MileagePlus account for posted accrual

You can earn up to 75,000 award miles per ticket. The 75,000 award miles cap may be applied to your posted flight activity in an order different than shown

PQD are a Premier status requirement for members in the U.S. only.

Accrual is only displayed for MileagePlus members who choose to accrue to their MileagePlus account.

eTicket Reminders

Check-in Requirement - Bags must be checked and boarding passes obtained at least 45 minutes prior to scheduled departure.

Baggage will not be accepted and advance seat assignments may be cancelled if this condition is not met.

EXCEPTION: When departing from Anchorage, Atlanta, Austin, Baltimore, Chicago, Cincinnati, Cleveland, Dallas/Ft. Worth, Denver, Detroit, Fort Lauderdale, Greenville-Spartanburg, Guam, Honolulu, Houston, Indianapolis, Jacksonville, Kona, Las Vegas, Los Angeles, Maui, Miami, New York (LGA), Newark, Orange County (SNA), Orlando, Philadelphia, Phoenix, Pittsburgh, Raleigh/Durham, Reno, San Diego, San Francisco, San Juan, PR (60 minutes), Savannah, Seattle, St. Louis, St. Thomas, U.S. Virgin Islands (60 minutes), Tampa, Washington, DC (both IAD and DCA), the check in requirement time for Passengers and Bags is 45 minutes except where noted.

Boarding Requirement - Passengers must be prepared to board at the departure gate with their boarding pass at least 15 minutes prior to scheduled departure.

Failure to meet the **Boarding Requirements** may result in cancellation of reservations, denied boarding, removal of checked baggage from the aircraft and loss of eligibility for denied boarding compensation.

Bring your boarding pass or this eTicket Receipt along with photo identification to the airport.

The FAA now restricts carry-on baggage to one bag plus one personal item (purse, briefcase, laptop computer, etc.) per passenger.

The fare rules for your ticket may restrict your carry-on baggage allowance even further.

For up to the minute flight information, sign-up for our Flight Status Updates or call 1-800-824-6200; in Spanish 1-800-426-5561.

D I V A

UNION SQUARE

440 GEARY STREET
SAN FRANCISCO CA 94102

Fenne , Christine

Confirmation Number: [REDACTED]

Room Number: 307

Room Type: D1K

No. of Guests: 1

ARRIVAL

DEPARTURE

Oct-17-2019

Oct-18-2019

DATE	CODE	DESCRIPTION	AMOUNT (USD)
Oct-17-2019	1050	Room Charge No Facility Fee	220.00
Oct-17-2019	8100	Occupancy Tax - Room	30.80
Oct-17-2019	8110	Business Tourism Assessment	4.95
Oct-17-2019	8120	CA Tourism Assessment Fee	0.43
Oct-18-2019	9007	D [REDACTED] t	(256.18)

TOTAL DUE: 0.00

TERMS:

SIGNATURE: X _____

DATE: _____

[View in browser](#)



Dear Christine Fenne,

We are delighted to be hosting you at Hotel Diva for your upcoming visit to San Francisco! Please review your reservation information carefully and email us at reservations@hoteldiva.com in case we missed anything.

HOTEL DIVA RESERVATION DETAILS

Booking Number	[REDACTED]	
Guest Name	Christine Fenne	
Arrival Date	10/17/2019	
Departure Date	10/18/2019	
Number of Nights	1	
Room Type	Deluxe 1 King	
Nightly Rate	10/17/2019	\$220.00
Facilities Fee	\$29 plus 14% taxes per day	
Taxes	Occupancy 16.445% for all nights (subject to change)	

Cancellation Policy Cancellation policy varies. Please see policy link for details.

Warmest regards,
Hotel Diva Team

[HOTEL POLICY >](#)

[UPGRADE NOW >](#)

Hotel Diva | 440 Geary Street | San Francisco, CA 94102
Tel: 415.885.0200 | www.hoteldiva.com

