

Information:

Drawer: Accounts Payable - Invoices  
Vendor Number: 1457755  
Vendor Name: Ascend Learning Holdings, LLC  
Invoice Number: INV0500515  
Invoice Date: 08/18/20  
PO Number: P0370695  
Check Number: 0272404  
Check Amount: \$ 13,455.00  
Check Date: 09/15/2020  
Department ID: 00225  
Reviewer Name: Adrianna Costello  
Voucher Number: V0640195  
Redaction Type: None  
Document Type: AP Invoice

Document Below

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From: ericsonm@cod.edu  
Sent: Wed Aug 19 19:00:09 CDT 2020  
To: invoicing@cod.edu  
CC:  
Subject: Fw: FW: College of DuPage - EHR Tutor - PO370695  
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Please see the attached invoice for PO 370695. Codes were received for students to access accounts. Also attached is updated ACH information, please see message from vendor below:

**Regarding Payment Due to COVID:**

Due to our office staff transitioning to remote work locations in response to COVID-19 related government orders, we are committed to providing as many flexible ways for you to make payments in order to make doing business with us as easy as possible during this challenging time. We know it is more important now than ever to ensure your payments are processed timely and accurately. We have heard from our banks that check processing will likely be delayed and so are offering to you the most efficient way to make payments, which is via ACH. Please use the attached formal ACH remittance instructions to make payment to ATI. Thank you for your continued partnership.

Please let us know if there are any issues that will prevent your timely payments in the near future so we can notate your account.

Thank you,

**Ed Ross** – Billing Account Manager

ATI Nursing Education

11161 Overbrook Road | Leawood, Kansas 66211

800-667-7531 | d 913-721-5695 | f 913-661-6245 | [www.atitesting.com](http://www.atitesting.com)

Melissa Ericson MSN, RNC-OB, CHSE, C-EFM, IBCLC, CCE  
Simulation Manager  
College of DuPage  
Office: HSC 2207M

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**From:** ATI Great Lakes <greatlakesmanager@atitesting.com >

**Sent:** Tuesday, August 18, 2020 4:03 PM

**To:** Daniel Krebs; Ericson, Melissa

**Subject:** RE: FW: College of DuPage - EHR Tutor - PO370695

Melissa,

Good afternoon!

Your order for EHR Tutor has been processed. Please see the attached invoice and the Product ID Handout for the 0521 and 0522 cohorts, and let us know if you have any questions.

Thank you!

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orders, we are committed to providing as many flexible ways for you to make payments in order to make doing business with us as easy as possible during this challenging time. We know it is more important now than ever to ensure your payments are processed timely and accurately. We have heard from our banks that check processing will likely be delayed and so are offering to you the most efficient way to make payments, which is via ACH. Please use the attached formal ACH remittance instructions to make payment to ATI. Thank you for your continued partnership.

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**From:** Ericson, Melissa <[ericsonm@cod.edu](mailto:ericsonm@cod.edu)>

**Sent:** Tuesday, August 18, 2020 1:25 PM

**To:** Daniel Krebs <[Daniel.Krebs@atitesting.com](mailto:Daniel.Krebs@atitesting.com)>

**Subject:** [EXTERNAL] FW: PO370695

**SECURITY WARNING:** External email. Please verify the sender's intent before opening attachments or clicking on links and never provide your username and password after clicking a link or opening an attachment in an email.

*For additional information, please visit the [Recognize and Avoid Phishing Scams page](#).*

See attached PO. Let me know if I need to update the contact person.

Melissa Ericson MSN, RNC-OB, C-EFM, CHSE, IBCLC, CCE

Simulation Lab Manager

College of DuPage

HSC 2207M

630-942-3938

**From:** Castellanos, Susan <[castellanoss1510@cod.edu](mailto:castellanoss1510@cod.edu)>

**Sent:** Tuesday, August 18, 2020 12:28 PM

**To:** 'anthony.perniciaro@ascendlearning.com' <[anthony.perniciaro@ascendlearning.com](mailto:anthony.perniciaro@ascendlearning.com)>

**Cc:** Ericson, Melissa <[ericsonm@cod.edu](mailto:ericsonm@cod.edu)>

**Subject:** PO370695

Dear Vendor,

Please find attached a College of DuPage (COD) Purchase Order for your processing purposes. To avoid any confusion, the College requests that all packages include the PO # on all shipments.

**Please confirm receipt of PO (Reply ALL) and process accordingly.**

**The warehouse is open Monday through Thursday: 9am to 2pm**

Shipping questions? Contact the COD Warehouse at: 630-942-2550

**Kindly monitor website for ongoing updates.**

Invoices questions? Contact Accounts Payable at [invoicing@cod.edu](mailto:invoicing@cod.edu) or 630-942-2228

*Susan Castellanos*

Procurement Services

425 Fawell Blvd. | IRC 1002 | Glen Ellyn, IL 60137-6599  
T: (630) 942-2216

**CONFIDENTIALITY NOTICE:** This e-mail message including attachments, if any, is intended for the person or entity to which it is addressed and may contain confidential, privileged, and/or proprietary material. Any unauthorized review, use, disclosure or distribution is prohibited. If you are not the intended recipient, please contact the sender by reply e-mail and destroy all copies of the original message.



11161 Overbrook Road | Leawood, Ks 66211  
p 800.667.7531 | f 913.685.2381  
EIN: 32-0222868 | GST# 802290502 RT0001

PO #	Description	Invoice #
370695	STO	INV0500515
Contact	Phone #	Invoice Date
Account Mgt Team	913-721-5695	8/18/2020
Payment Terms	Due Date	Account #
Net 60	10/17/2020	1838

**Bill To:**

College of Dupage ADN  
Ellen Davel  
425 Fawell Blvd  
Glen Ellyn IL 60137-6509

**Ship To:**

College of Dupage ADN  
Ellen Davel  
425 Fawell Blvd  
Glen Ellyn IL 60137-6509

**APPROVED**  
**08/28/20 - DILYSS GALLYOT**

**INVOICE**

Item #	Item Description	Quantity	Unit Price	Ext. Price
EHRT RN USER	RN EHR Tutor User License -Cohort 0521	67	\$65.00	\$4,355.00
EHRT RN USER	RN EHR Tutor User License -Cohort 0522	70	\$130.00	\$9,100.00
<b>INVOICE REVIEWED</b> <b>OKAY TO PAY</b> <b>ADRIANNA COSTELLO 08/21/20</b>				

**ALL SALES ARE FINAL**

Defective products replaced within 30 days of purchase

<b>Subtotal</b>	\$13,455.00
<b>Tax</b>	\$0.00
<b>Freight</b>	\$0.00
<b>TOTAL</b>	\$13,455.00



Billing Inquiries  
913-721-5695

**REMITTANCE**

Invoice Number INV0500515  
Due Date 10/17/2020  
Account Number 1838

Please enclose this remittance with your payment  
to ensure proper processing.

**Amount Due \$13,455.00**

Amount Enclosed

**REMIT TO:**

Assessment Technologies Institute, LLC  
62277 Collections Center Drive  
Chicago, IL 60693-0622



## Vendor ACH Authorization Form

### 1. Please Check One:



NEW Direct Deposit



CHANGE Direct Deposit



CANCEL Direct Deposit

### 2. Vendor/Payee Information

**Name:** ATI Assessment Technologies Institute, LLC

**Address:** 11161 Overbrook Rd. Leawood, KS 66211

**Tax ID Number:** 32-0222868

**Telephone Number:** 800-667-7531

**Email Address:** clientmanager@atitesting.com

### 3. Financial Institution Information

**Bank Name:** Bank of America

**Remit to Address:** 62277 Collections Center Drive Chicago, IL 60693-0622

**Bank phone number:** 888-715-1000

**Bank Account Number:** 4427152142

**Nine-Digit Bank Routing/Transit Number (ABA):** 111000012

**Type of Account:**



Checking



Savings

**4. Approvals/Authorizations** - I certify that the information provided on this form is correct, and I hereby authorize Accounts Payables to electronically deposit payments to the bank account designated above. I, the undersigned, represent and warrant that I am authorized to execute this document on behalf of the Payee.

**Print Name:** GARY C. MADSEN

**Signature:**

**Date:** 10-14-19

**Email to send payment information to**

accounts.receivable@ascendlearning.com



September 4, 2014

ASSESSMENT TECHNOLOGIES INSTITUTE LLC

Subject: Account and ABA Routing Verification

Dear Sir,

This is to confirm that as of the date of this letter, according to our records, the following information is correct for the indicated account held at our bank:

Account Name:	ASSESSMENT TECHNOLOGIES INSTITUTE LLC
Account Number:	4427152142
Account Holder Address:	11161 Overbrook Rd Leawood, KS. 66211-6211
Routing/Transit for ACH:	111000012
Routing/Transit for Wires:	026009593
SWIFT:	BOFAUS3N

Bank of America will not update this letter in the future unless specifically requested by the account holder.

Sincerely,

A handwritten signature in black ink, appearing to read "Jean Satterlee". The signature is fluid and cursive, with the first name "Jean" and last name "Satterlee" clearly distinguishable.

Jean Satterlee

*VP, Dedicated Service Director*

**Client Fulfillment & Service**

**Bank of America Merrill Lynch**

**888-715-1000, Ext: 53057**



# Request for Taxpayer Identification Number and Certification

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

► Go to [www.irs.gov/FormW9](http://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. <b>ASCEND LEARNING HOLDINGS, L.L.C.</b>	
2 Business name/disregarded entity name, if different from above <b>ASSESSMENT TECHNOLOGIES INSTITUTE, L.L.C.</b>	
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.	
<input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input checked="" type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ► <b>P</b> 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. <input type="checkbox"/> Other (see instructions) ►	
4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <small>(Applies to accounts maintained outside the U.S.)</small>	
5 Address (number, street, and apt. or suite no.) See instructions. <b>11161 OVERBROOK ROAD</b>	Requester's name and address (optional)
6 City, state, and ZIP code <b>LEAWOOD, KS 66211</b>	
7 List account number(s) here (optional) <b>REMITTANCE ADDRESS: 62277 COLLECTIONS CENTER DRIVE CHICAGO, IL 60693-0622</b>	

## 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
<b>32-022868</b>

## 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.

<b>Sign Here</b>	Signature of U.S. person ► 	Date ► <b>JANUARY 13, 2020</b>
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## 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](http://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.*