

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1084135

Vendor Name: DuPage Chiefs of Police Associ

Invoice Number: 01/07/2021

Invoice Date: 01/07/21

PO Number:

Check Number: 0275700

Check Amount: \$ 275.00

Check Date: 01/12/2021

Department ID: 00835

Reviewer Name:

Voucher Number: V0657795

Redaction Type: Other

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

Document Below

From: Zerrudo, Maria <zerrudom@cod.edu>
Sent: Thu Jan 07 08:48:06 CST 2021
To: invoicing@cod.edu
CC:
Subject: FW: PD form - J. Nehls

From: Cassel, Adrienne <cassel@cod.edu>
Sent: Thursday, January 7, 2021 8:46 AM
To: Zerrudo, Maria <zerrudom@cod.edu>
Cc: Nehls, James <nehlsj156@cod.edu>
Subject: PD form - J. Nehls

Hi Marivic,

Please process the attached payment for Jim Nehls. The vendor # is at the top. Thanks.

Adrienne

Adrienne Cassel
Human Resources, Compensation Specialist
College of DuPage
425 Fawell Blvd
Glen Ellyn, IL 60137

[attachment: PD Nehls, J. Dupage Chiefs of Police.pdf]

Professional Dues Reimbursement
(Classified • Managerial • FOP • Union 399)

Eligible after 6 months probation

Employee:  12/14/20
Department: 

Payment to: ☐ Me (receipt attached) ☒ Organization (return check to me)

☒ Classified/Managerial — \$500 max per year ☐ Union 399 — \$150 max per year ☐ FOP — \$200 max per year

I request reimbursement of \$ 275.00 for membership dues in:

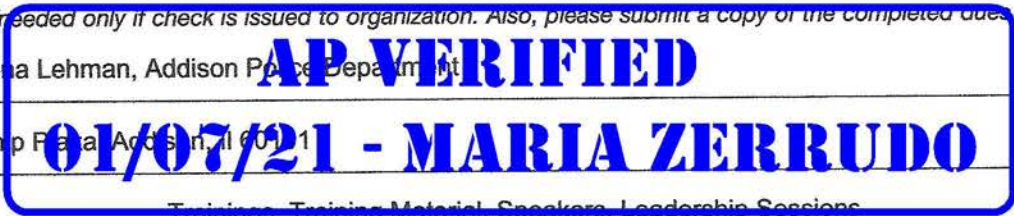
Name of organization: DuPage County Chiefs of Police Association - 2021

Address: *(needed only if check is issued to organization. Also, please submit a copy of the completed dues application form.)*

c/o Filomena Lehman, Addison Police Department

3 Friendship Plaza, Addison, IL 60101

Purpose of organization: Trainings, Training Material, Speakers, Leadership Sessions



APPROVED ☒ (considered a business expense helpful in the performance of the employee's duties)

DENIED ☐

Signature of Dean or Administrator: Joe Mullin Date: 01/06/2021

Obtain signature of Dean or Administrator — Mail to Human Resources

OFFICE USE ONLY:

Reimbursement amount \$ 275.00 Account #01-90-00835-52090-19 Fiscal year: 21

H/R approval: A. Cassel Date sent to Accounts Payable: 1/7/21

Date request approved: _____ Date expense approved: _____

**DUPAGE COUNTY CHIEFS****OF POLICE ASSOCIATION**

Incorporated under the laws of the State of Illinois

March 21, 1963

NAME: [REDACTED] TITLE: DEPUTY CHIEF☒ RENEW ☐ NEW MEMBER/DATE OF APPOINTMENT —DEPARTMENT/AGENCY/COMPANY COLLEGE OF DUPAGE POLICE DEPARTMENT

BUSINESS ADDRESS: [REDACTED]

BUSINESS PHONE: [REDACTED]

E-MAIL ADDRESS: [REDACTED]

HOME ADDRESS: [REDACTED]

HOME PHONE: N/A Street N/A City N/A Zip Code N/A FAX: N/APLEASE SEND ASSOCIATION MAIL TO: ☐ OFFICE ☐ HOME ☐ E-MAIL ADDRESS

I HEREBY MAKE APPLICATION FOR MEMBERSHIP IN ACCORDANCE WITH THE PROVISIONS OF THE BY-LAWS AND CONSTITUTION OF SAID DUPAGE COUNTY CHIEFS OF POLICE ASSOCIATION FOR THE FOLLOWING CLASSIFICATION OF MEMBERSHIP:

☒ **ACTIVE:**
CHIEFS, COMMISSIONERS, SUPERINTENDENTS, DIRECTORS, HAVING ACTUAL SUPERVISION OF AND RECEIVING SALARIES FROM ANY LEGALLY CONSTITUTED STATE, COUNTY OR MUNICIPAL POLICE DEPARTMENT – HEADS OF ALL FEDERAL AGENCIES HAVING AUTHORITY TO ENFORCE POLICE REGULATIONS UNDER THE LAWS OF THE UNITED STATES – COMMANDERS OF THE STATE POLICE DISTRICTS HAVING NORMAL POLICE JURISDICTIONS WITHIN THE COUNTY OF DUPAGE – SHERIFF, STATE'S ATTORNEY, EXECUTIVE OFFICERS OR RAILROAD POLICE HAVING SYSTEMS WITHIN DUPAGE COUNTY, CORONER, CHIEF DEPUTY SHERIFF, CHIEF INVESTIGATOR FOR THE STATE'S ATTORNEY, EXECUTIVE HEADS AND DIVISION OR BUREAU COMMANDER OFFICERS OF SUCH DEPARTMENTS ONLY WHEN RECOMMENDED FOR SUCH MEMBERSHIP BY THE CHIEF OF POLICE OR OTHER COMMANDING OFFICER ANNUALLY, CIRCUIT COURT CLERK, SUPERVISOR OF COURT CLERKS AND CHIEF MAGISTRATE OF THE 18TH JUDICIAL COURT – ANY ACTIVE MEMBER WHO HAS BEEN DULY RETIRED OR PENSIONED.

☐ **ASSOCIATE:**
HEADS OF SECURITY STORES, RESIDENT AGENTS OF ALL FEDERAL AGENCIES, CHIEF DEPUTY CORONER, PERSONS KNOWN TO BE A CONSISTENT ADVOCATE OF LAW ENFORCEMENT WHO MAY DESIRE TO LEND THEIR AID TO THE FORCES ENGAGED IN THAT PURSUIT, REPRESENTATIVES OF COMMERCIAL COMPANIES DEALING IN POLICE SERVICES OR SUPPLIES.

NEW ACTIVE MEMBERS: YOU MUST BE RECOMMENDED BY AND OBTAIN THE SIGNATURE OF THE CHIEF OF POLICE OR OTHER COMMANDING OFFICER OF YOUR AGENCY.

RECOMMENDED BY: N/A Signature

Enclose 2021 dues of \$275.00 and mail to: DuPage County Chiefs of Police Association c/o Filomena Lehman Addison Police Department 3 Friendship Plaza Addison, IL 60101	Dues Received:
	Executive Approval:
	Membership Approval:
	President's Signature:

DEDICATED TO POLICE ADMINISTRATION IN DU PAGE COUNTY