

Information:

Drawer: Finance

Number: **** Other Redaction ****

Name: **** Other Redaction ****

Invoice Number: C910035

Invoice Date:

PO Number:

Check Number: 0275821

Check Amount: \$ 100.00

Check Date: 01/13/2021

Voucher Number: V0647354

AP Type: IM Invoices < \$15,000

Redaction Type: Other

Document Type: Independent Contractor Agreement

Document Below

Note: Parts of the image below may have been redacted

College of DuPage

* Independent Contractor Agreement

(Not to be used for contracts in excess of \$5,000.00)

* After final approver signs the completed form, send to invoicing@cod.edu.

VENDOR NUMBER

1618456

ACCOUNT NUMBER/AMOUNT

FUND FUNCTION DEPARTMENT OBJECT AMOUNT

01

20

00923

5309004

100.00

APPROVED-Supervisor, Purchasing

DATE

APPROVED AGREEMENT
JOYCE SEKERKA 10.30.20

PART I. Complete PRIOR to performance of contractual services.

Name Katherine Hughes

(THIS NAME SHOULD BE THE SAME NAME THAT APPEARS ON LINE 1 OF THE W-9 FORM)

Tax I.D. #/S.S. #

Phone Number 847207-7511

(No college employee may be paid as an independent contractor.)

Street 3352 Thornberry Dr.

City, State, Zip Code Glenview, IL 60025

Agrees to perform on 9/4/20 the following services for the College of DuPage:

DATE (S)

Music Fridays Performance

If additional space is needed, please continue description of services on separate pages and attach to this form.

The sum of \$100.00 will be paid to the independent contractor upon completion of the services. The contractor will be responsible for all taxes related to income from the above services. The contractor understands that he/she is self employed and must carry at his/her own cost any insurance coverage such as workers compensation, medical, property & liability including auto related to the above mentioned services.

This is a "work for hire" agreement. All rights to materials produced or products from services rendered are property of College of DuPage in perpetuity.

The contractor agrees to hold College of DuPage, its Trustees, officers, directors, agents, successors and assigns, harmless from and against all losses, damages, injuries, claims demands, and expenses, including attorneys' fees, which may arise during performance of this agreement.

☒ I have read Board Procedure #15-465 and have determined that the individual on this agreement meets the definition of an independent contractor.

Anthony Ramos

Digitally signed by
Anthony Ramos
Date: 2020.09.22
12:51:24 -05'00'

DEPARTMENT AUTHORIZED SIGNATOR

09/01/2020

DATE

All independent contractors must also certify below regarding the status of any educational loans as required by state law effective January 1, 1988.

(Must Check One)

☒ I certify that I am not in default on an educational loan guaranteed by the State in the amount of \$600.00 or more.

☐ I certify that I am in default on an educational loan guaranteed by the State in the amount of \$600.00 or more and I agree to make arrangements for repayment of this loan with the maker or guarantor within six months from the date of this contract.

I agree with the terms stated above and certify that I have received a copy of the contractual agreement.

SIGNATURE OF INDEPENDENT CONTRACTOR

Katherine L. Hughes

DATE

9/17/2020

PART II. Complete AFTER performance of contractual services.

Authorized Signator certifies that the contractual services described in Part I above were completed satisfactorily and authorizes payment in full. (Payment is to be made only after completion of the contractual service.)

Anthony Ramos

Digitally signed by Anthony
Ramos
Date: 2020.09.22 12:51:46 -05'00'

COLLEGE AUTHORIZED SIGNATURE

DATE

9/22/20

COUNTER SIGNATOR (OPTIONAL)

DATE

*See board policy, procedures and instructions on next page.
(This agreement is VOID if amount exceeds \$5,000.00)

From: cruseb199@cod.edu
Sent: Thu Oct 08 11:14:37 CDT 2020
To: invoicing@cod.edu
CC:
Subject: FW: HUGHES IC

From: Fanelli Munguia, Catherine <munguiac@cod.edu>
Sent: Thursday, October 8, 2020 9:53 AM
To: Cruse, Bethany <cruseb199@cod.edu>
Subject: RE: HUGHES IC

Hi Bethany,

I'm attaching Hughes and also adding Caulfield as I just received her vendor ID as well. I was unable to add it to the document though. It's 1618457.

Thanks!
Cassi

Cassi Fanelli Munguia

Acad Div. Business Associate
Arts, Communication and Hospitality

From: Cruse, Bethany <cruseb199@cod.edu>
Sent: Thursday, October 8, 2020 9:13 AM
To: Fanelli Munguia, Catherine <munguiac@cod.edu>
Subject: RE: HUGHES IC
Importance: High

Cassi,
Following up on this one, I have not received a completed form. Please reply.

Thanks

Bethany Cruse
AP Lead
College Of DuPage
630-942-4294

From: Cruse, Bethany
Sent: Thursday, September 24, 2020 1:06 PM
To: Munguia, Cassi <munguiac@COD.EDU>
Subject: RE: HUGHES IC

Cassi,
We can't access that via perceptive content. Please hand write the info and rescan.

Thanks

Bethany Cruse
AP Lead

AP Lead
College Of DuPage
630-942-4294

From: Munguia, Cassi <munguiac@cod.edu>
Sent: Thursday, September 24, 2020 12:43 PM
To: Cruse, Bethany <cruseb199@cod.edu>
Subject: RE: HUGHES IC

Hi Bethany,

It will not let me complete the top portion so I added it in as a comment. It's that little yellow conversation box there.

Cassi

Cassi Munguia

Administrative Assistant
Arts, Communication and Hospitality

From: Cruse, Bethany <cruseb199@cod.edu>
Sent: Thursday, September 24, 2020 11:52 AM
To: Munguia, Cassi <munguiac@cod.edu>
Subject: HUGHES IC

Cassi,
Top portion needs to be completed, please resend to invoicing.



Thanks

Bethany Cruse
AP Lead
College Of DuPage
630-942-4294

VENDOR NUMBER

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ACCOUNT NUMBER/AMOUNT

FUND FUNCTION

DEPARTM



OBJECT

AMOUNT

APPROVED—Supervisor, Purchasing

DATE

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