

Information:

Drawer: Finance

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

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

Invoice Number: C910114

Invoice Date:

PO Number:

Check Number: 0279167

Check Amount: \$ 200.00

Check Date: 04/13/2021

Voucher Number: V0666226

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

\*Lynda Nagle was unable to make changes to the IC agreement and noted Amount, GL Code, and Vendor Number in attachment.

**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](mailto:invoicing@cod.edu).

VENDOR NUMBER				
ACCOUNT NUMBER/AMOUNT				
FUND	FUNCTION	DEPARTMENT	OBJECT	AMOUNT
APPROVED—Supervisor, Purchasing				DATE

**PART I. Complete PRIOR to performance of contractual services.**

Name Amanda J. Mesirow Tax I.D. #/S.S. # [REDACTED]  
(THIS NAME SHOULD BE THE SAME NAME THAT APPEARS ON LINE 1 OF THE W-9 FORM.) (ALSO COMPLETE AND SIGN FORM W-9 ATTACHED)

Phone Number 319 230-1981 (No college employee may be paid as an independent contractor.)

Street 18631 Marshfield Ave

City, State, Zip Code Homewood, IL, 60430

Agrees to perform on March 5th, 2021 the following services for the College of DuPage:  
DATE (S)

Guest lecturer/workshop moderator for Kayla Chepyator's Culture, Institutions and Society in the United States course.

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

The sum of \$ 200.00 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.

DEPARTMENT AUTHORIZED SIGNATOR

02/17/2021

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

[Signature]

DATE

02.17.2021

**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.)

Tamara McClain

COLLEGE AUTHORIZED SIGNATURE

DATE

3.8.21

COUNTER SIGNATOR (OPTIONAL)

DATE

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

06-10-03435-5909001 for Fund, Function, Dept.  
object code – Amount is \$200 and date submitted  
is 3/3/2021. By Lynda Nagle. Support docs  
attached. Form not support typed text in boxes.

Vendor  
Number162689

-----  
From: Cruse, Bethany <cruseb199@cod.edu>  
Sent: Mon Mar 22 11:31:20 CDT 2021  
To: invoicing@cod.edu  
CC:  
Subject: FW: MESIROW IC  
-----

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**From:** Nagle, Lynda <naglel@cod.edu>  
**Sent:** Friday, March 19, 2021 4:18 PM  
**To:** Cruse, Bethany <cruseb199@cod.edu>  
**Subject:** FW: MESIROW IC

Hi Bethany.

Thank you for your email...By chance, did you see the attached, which has two pages,(first page has requested info) I made numerous attempts to enter the info in the box, but could not type in the form.

**May I ask you...does it seem the only option is to redo the form from scratch including vendor signature?**

Thanks so much for your input. Lynda

Respectfully,

Lynda Nagle  
Administrative Assistant  
Office of Admissions and Outreach  
College of DuPage  
425 Fawell Blvd. | SSC 2207 | Glen Ellyn, IL 60137-6599  
Phone: 630.942.2441 | Fax: 630.790.2686 | [naglel@cod.edu](mailto:naglel@cod.edu)



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**From:** Cruse, Bethany <cruseb199@cod.edu>  
**Sent:** Friday, March 19, 2021 3:28 PM  
**To:** Nagle, Lynda <naglel@cod.edu>  
**Subject:** MESIROW IC

Lynda,

This was rejected due to not having VN# and GL code on IC. Please resubmit to invoicing with this info.

Top section should be completed.

## Request for Taxpayer Identification Number and Certification

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

Print or type See Specific Instructions on page 2.	<b>1</b> Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. <b>Amanda J. Mesirow</b>	
	<b>2</b> Business name/disregarded entity name, if different from above	
	<b>3</b> Check appropriate box for federal tax classification; check only <b>one</b> of the following seven boxes: <input checked="" type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ <b>Note.</b> For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner. <input type="checkbox"/> Other (see instructions) ▶	<b>4</b> 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>
	<b>5</b> Address (number, street, and apt. or suite no.) <b>18631 Marshfield Ave.</b>	Requester's name and address (optional)
	<b>6</b> City, state, and ZIP code <b>Homewood, IL, 60430</b>	
	<b>7</b> List account number(s) here (optional)	

### 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 Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

**Note.** If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

Social security number								
[REDACTED]								
or								
Employer identification number								

### Part II Certification

Under penalties of perjury, I certify that:

1. 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
2. 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
3. I am a U.S. citizen or other U.S. person (defined below); and
4. 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 on page 3.

Sign  
Here

Signature of  
U.S. person ▶

Date ▶

02.17.2021

### General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at [www.irs.gov/fw9](http://www.irs.gov/fw9).

#### 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?* on page 2.

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income; and
4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.



-----  
From: Nagle, Lynda <naglel@cod.edu>  
Sent: Mon Mar 08 16:21:47 CST 2021  
To: invoicing@cod.edu  
CC: sekerkaj@cod.edu, chepyat@cod.edu  
Subject: International Student ICC Dept - Services rendered - Independent Contract Approval Request for \$200  
-----

Good afternoon Joyce.

The attached represents the request from the International/CCI Program for payment of services rendered for the workshop "This I believe" in the amount of \$200 on Friday, March 5, 2021.

A summary of the attached are as follows:

- Justification for the speaker
- Approval from Program Coordinator
- Approval from Manager, Kathy Smid of International
- Approval from Director, Tamara McClain
- Independent Contract form – Signed by vendor and also T. McClain signature
- Invoice in the amount of \$200 – Joyce, you mentioned accepting this directly from us – Thank you.
- Email confirming services rendered on March 5, 2021.

Joyce, the Accounts Payable disbursement schedule indicates April 16<sup>th</sup> for mailing date of paper checks. Please send directly to the vendor.

If there are any questions, please let me know. Thank you. Lynda

Respectfully,

Lynda Nagle  
Administrative Assistant  
Office of Admissions and Outreach  
College of DuPage

---

**From:** Sekerka, Joyce <sekerkaj@cod.edu>  
**Sent:** Monday, March 1, 2021 9:06 AM  
**To:** Stella, Antoinette <stellaa212@cod.edu>  
**Cc:** Refakes, Eugene <refakese@cod.edu>; Nagle, Lynda <naglel@cod.edu>; McClain, Tamara <mcclaint57@cod.edu>; Chepyator, Kayla <chepyat@cod.edu>  
**Subject:** Re: My Access - Request a Payment (Under \$500)

Good Morning Everyone,

Since this is an Independent Contractor, the IC form should be completed and you can note the GL code on the form before submitting to [invoicing@cod.edu](mailto:invoicing@cod.edu).

Once the services have been rendered, we will go ahead and process the payment.

Thanks,  
Joyce

**Joyce Sekerka**  
**Accounts Payable Supervisor**  
**College of DuPage**  
425 Fawell Blvd.  
Glen Ellyn, IL 60137-6599  
630-942-2293  
Email: [sekerkaj@cod.edu](mailto:sekerkaj@cod.edu)



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**From:** Stella, Antoinette  
**Sent:** Saturday, February 27, 2021 7:29 PM  
**To:** Sekerka, Joyce  
**Cc:** Refakes, Eugene; Nagle, Lynda; McClain, Tamara; Chepyator, Kayla; Stella, Antoinette  
**Subject:** RE: My Access - Request a Payment (Under \$500)

Hi Joyce,

Could you please provide direction to Lynda regarding her payment question below?

Thank you,

**Toni Stella**  
**Budget Analyst | Budget Office**  
**College of DuPage**  
425 Fawell Blvd. | SRC 2130 | Glen Ellyn, IL 60137-6599 | USA  
Phone 630.942.3271 | [stellaa212@cod.edu](mailto:stellaa212@cod.edu)

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**From:** Nagle, Lynda <naglel@cod.edu>

**Sent:** Friday, February 26, 2021 7:34 PM

**To:** Stella, Antoinette <stellaa212@cod.edu>; Refakes, Eugene <refakese@cod.edu>

**Cc:** Smid, Kathleen <smidka@cod.edu>; Chepyator, Kayla <chepyat@cod.edu>; McClain, Tamara <mcclaint57@cod.edu>

**Subject:** Re: My Access - Request a Payment (Under \$500)

Hi Kayla...Please share the full account number that you were going to use to pay for the \$200 speaker. Toni and Eugene...once Kayla replies with the full account number, would one of you be able to share the quickest way to add that account to one of our MyAccess "Request a Payment"? Or do you know who we should ask to request the paperwork needed to complete this request?  
Thank you again very much for assisting us - The event is March 5th.  
Lynda

---

**From:** Nagle, Lynda

**Sent:** Friday, February 26, 2021 4:32:35 PM

**To:** Stella, Antoinette; Refakes, Eugene

**Cc:** Smid, Kathleen; Chepyator, Kayla; McClain, Tamara

**Subject:** My Access - Request a Payment (Under \$500)

Hi Toni. Hi Eugene.

International does not have an adm. Assistant.

Would one of you be able to advise if

Kathy Smid, Gabi Carr or Kayla Chepyator are set up to use the "Request a Payment" under \$500.

We would like to make arrangements for a speaker for International and the cost is \$200.

Any input or direction would be appreciated Thank you. Lynda Nagle



Respectfully,

Lynda Nagle

Administrative Assistant

Office of Admissions and Outreach

College of DuPage

425 Fawell Blvd. | SSC 2207 | Glen Ellyn, IL 60137-6599

Phone: 630.942.2441 | Fax: 630.790.2686 | [naglel@cod.edu](mailto:naglel@cod.edu)



[attachment: Mesirow Invoice COD.Updated.2-26-21.pdf]

[attachment: Justification.Leadership Speaker.docx]



[attachment: Approval - Leadership Speaker.pdf]

[attachment: Kathy Smid approval- Voucher for payment for CCI Program - Workshop This I Believe - \$200.msg]

[attachment: Tamara McClain approval Voucher for payment for CCI Program - Workshop This I Believe - \$200.msg]

[attachment: Services rendered March 5 2021 CCI This I believe workshop.pdf]

[attachment: CCI Speaker Amanda Mesirow.pdf]

## Amanda J. Mesirow Keynotes and Workshops

Amanda J. Mesirow Keynotes and Workshops  
18631 Marshfield Ave  
Homewood IL 60430  
Phone: 319.230.1981  
Email: amandamesirow@gmail.com

# INVOICE

**Invoice Number** COD00001  
**Date** March 2, 2021

### Billing Address

Kayla Chepyator  
CCI Program Coordinator  
College of DuPage  
425 Fawell Blvd 1 SSC 2225  
Glen Ellyn, IL 60137  
chepyat@cod.edu  
630.942.2564

### Comments or Special Instructions

Below is the speaker fee for Amanda J. Mesirow Keynotes and Workshops on behalf of College of DuPage for the "This I Believe" workshop. Workshop will take place remotely on March 5, 2021, from 1pm-3pm.

DESCRIPTION	UNIT PRICE (if applicable)	AMOUNT
Speaker Fee		\$200.00
	<b>SUBTOTAL</b>	\$0.00
	<b>TAX</b>	\$0.00
	<b>TOTAL DUE</b>	\$200.00

Please make all checks payable to Amanda Mesirow.

If you have any questions concerning this invoice, please contact Amanda directly at amandamesirow@gmail.com or at 319.230.1981

**THANK YOU FOR THE HONOR OF YOUR BUSINESS!**



**COMMUNITY COLLEGE CONSORTIUM  
JUSTIFICATION FOR USE OF TUITION FUNDS**



**Justification: Leadership Speaker for CSI Class**

School: **College of DuPage**  
Program Coordinator: Kayla Chepyator  
Date: 2/16/21  
Number of Students: 13 Students

Expense: **Speaker Fee**

Session Title: This I Believe: How your Values Create Your Leadership

Total cost per group: \$200.00

How is this activity meeting the **55% educational requirement**? Students will learn how their values shape their leadership abilities in this session. The presentation helps students identify what they believe and then explains how this shapes them as a leader. It also looks at how to determine others' styles and beliefs about leadership.

How is this trip meeting the **35% cultural requirement**? We will be doing this session within the context of our multi-cultural perspectives which will play a part in our learning and understanding.

How is this trip meeting the **10% recreational requirement**? N/A since this is a learning session for tuition funds not cultural funds.

## [External] RE: Justification for Tuition Funds

Mohamed, Sara S. <samohamed@nvcc.edu>

### Reply

Tue 2/16/2021 11:17 AM

To:

Chepyator, Kayla

Label: Inbox Retention - 1 year (1 year) Expires: 2/16/2022 11:17 AM

Justification.Leadership Speaker.docx91 KB

### Download

Report Suspicious Mail

CAUTION: This email originated from outside of COD's system. Do not click links, open attachments, or respond with sensitive information unless you recognize the sender and know the content is safe.

Hi Kayla,

This is approved. Please remember to copy Dana to these requests.

Thanks,

Sara

**From:** Chepyator, Kayla <chepyat@cod.edu>

**Sent:** Tuesday, February 16, 2021 11:56 AM

**To:** Mohamed, Sara S. <samohamed@nvcc.edu>

**Subject:** Justification for Tuition Funds

Dear Sara,

Please see the attached justification form for a leadership speaker for CSI class. Please let me know if this request is approved.

Thanks,

Kayla

Date: Fri, 26 Feb 2021 9:29:26 PM (UTC)  
Subject: RE: Seeking your approval - Voucher for payment for CCI Program - Workshop, "This I Believe" - \$200  
From: Smid, Kathleen <smidka@cod.edu>  
To: Nagle, Lynda <naglel@cod.edu>; McClain, Tamara <mcclaint57@cod.edu>;  
CC: Chepyator, Kayla <chepyat@cod.edu>;  
I approve

Kathy Smid  
Manager, International Student Services/PDSO  
College of DuPage  
425 Fawell Blvd. | SSC 2225D | Glen Ellyn, IL 60137-6599  
phone 630.942.3328 // [smidka@cod.edu](mailto:smidka@cod.edu)

---

**From:** Nagle, Lynda <naglel@cod.edu>  
**Sent:** Friday, February 26, 2021 1:08 PM  
**To:** Smid, Kathleen <smidka@cod.edu>; McClain, Tamara <mcclaint57@cod.edu>  
**Cc:** Chepyator, Kayla <chepyat@cod.edu>  
**Subject:** Seeking your approval - Voucher for payment for CCI Program - Workshop, "This I Believe" - \$200  
**Importance:** High

Good afternoon.  
On behalf of Kayla Chepyator and the CCI Program, please review the following request.

***If you approve, please reply back "I approve."***  
Your email approval will be attached **to the voucher** once it is generated.

Amanda J. Mesirow Keynotes and Workshops  
18631 Marshfield Ave  
Homewood IL 60430  
Phone: 319.230.1981  
Email: [amandamesirow@gmail.com](mailto:amandamesirow@gmail.com)

"This I believe" Workshop

Cost: \$200

Please let me know if there are any questions.  
Thank you. Lynda

Respectfully,

Lynda Nagle  
Administrative Assistant  
Office of Admissions and Outreach  
College of DuPage  
425 Fawell Blvd. | SSC 2207 | Glen Ellyn, IL 60137-6599  
Phone: 630.942.2441 | Fax: 630.790.2686 | [naglel@cod.edu](mailto:naglel@cod.edu)

Date: Fri, 26 Feb 2021 7:59:58 PM (UTC)  
Subject: RE: Seeking your approval - Voucher for payment for CCI Program - Workshop, "This I Believe" - \$200  
From: McClain, Tamara <mcclaint57@cod.edu>  
To: Nagle, Lynda <naglel@cod.edu>;  
I approve!

---

**From:** Nagle, Lynda <naglel@cod.edu>  
**Sent:** Friday, February 26, 2021 1:08 PM  
**To:** Smid, Kathleen <smidka@cod.edu>; McClain, Tamara <mcclaint57@cod.edu>  
**Cc:** Chepyator, Kayla <chepyat@cod.edu>  
**Subject:** Seeking your approval - Voucher for payment for CCI Program - Workshop, "This I Believe" - \$200  
**Importance:** High

Good afternoon.

On behalf of Kayla Chepyator and the CCI Program, please review the following request.

***If you approve, please reply back "I approve."***

Your email approval will be attached **to the voucher** once it is generated.

Amanda J. Mesirow Keynotes and Workshops  
18631 Marshfield Ave  
Homewood IL 60430  
Phone: 319.230.1981  
Email: [amandamesirow@gmail.com](mailto:amandamesirow@gmail.com)

"This I believe" Workshop

Cost: \$200

Please let me know if there are any questions.

Thank you. Lynda

Respectfully,

Lynda Nagle  
Administrative Assistant  
Office of Admissions and Outreach  
College of DuPage  
425 Fawell Blvd. | SSC 2207 | Glen Ellyn, IL 60137-6599  
Phone: 630.942.2441 | Fax: 630.790.2686 | [naglel@cod.edu](mailto:naglel@cod.edu)

 **College of DuPage**



**From:** [Chepyator, Kayla](#)  
**To:** [Nagle, Lynda](#)  
**Subject:** Guest Speaker  
**Date:** Monday, March 8, 2021 10:37:22 AM

---

Hi Lynda,

I hope that you had a nice weekend! We had the session with our speaker on Friday and it went great. Please proceed with the payment.

Thanks,  
Kayla

Kayla Chepyator  
Community College Initiative Program Coordinator  
**College of DuPage**  
630-942-2564  
[chepyat@cod.edu](mailto:chepyat@cod.edu)