

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 0639687

Vendor Name: Ms Jana V. Cronin

Invoice Number: CRONON-061021

Invoice Date: 06/10/21

PO Number:

Check Number: 0282046

Check Amount: \$ 400.00

Check Date: 06/14/2021

Department ID: 11999

Reviewer Name:

Voucher Number: V0686267

Redaction Type: None

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

Document Below

From: Zerrudo, Maria <zerrudom@cod.edu>
Sent: Mon Jun 14 08:02:06 CDT 2021
To: invoicing@cod.edu
CC:
Subject: FW: Manual Check Request Minniti, Stephanie and Cronin, Jana

From: Sekerka, Joyce <sekerkaj@cod.edu>
Sent: Monday, June 14, 2021 7:17 AM
To: Zerrudo, Maria <zerrudom@cod.edu>; Cruse, Bethany <cruseb199@cod.edu>
Subject: FW: Manual Check Request Minniti, Stephanie and Cronin, Jana

Good Morning,

Can you please process these two check requests? Ellen Roberts has approved and they need to be issued this Wednesday.

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

From: Humphrey, Vera <humphreyv@cod.edu>
Sent: Thursday, June 10, 2021 8:12 PM
To: Sekerka, Joyce <sekerkaj@cod.edu>
Cc: McGowan, Ellen <mcgowan@cod.edu>
Subject: FW: Manual Check Request Minniti, Stephanie and Cronin, Jana

Hi Joyce,

Check print for 6/16 has been approved.

If you have any questions, please contact Ellen McGowan.

Thank you.

Vera Humphrey
Administrative Assistant to the
Interim Vice President
of Administrative Affairs

College of DuPage | 425 Fawell Blvd | SRC 2130 | Glen Ellyn, IL 60137
630-942-4285 (ph) | 630-942-2297 (fax)

x

From: Roberts, Ellen <roberts@cod.edu>
Sent: Thursday, June 10, 2021 7:41 PM
To: Humphrey, Vera <humphreyv@cod.edu>
Subject: FW: Manual Check Request Minniti, Stephanie and Cronin, Jana

Vera,

Attached please find the signed forms.

Thank you,

Ellen

Ellen M. Roberts
Interim Vice President, Administrative Affairs
College of DuPage
425 Fawell Blvd.
Glen Ellyn, IL 60137
roberts@cod.edu
630-942-2218

From: Humphrey, Vera <humphreyv@cod.edu>
Sent: Thursday, June 10, 2021 7:26 PM
To: Roberts, Ellen <roberts@cod.edu>
Subject: FW: Manual Check Request Minniti, Stephanie and Cronin, Jana

Hi Ellen,

For your approval.

Thank you.

Vera Humphrey
Administrative Assistant to the
Interim Vice President
of Administrative Affairs

College of DuPage | 425 Fawell Blvd | SRC 2130 | Glen Ellyn, IL 60137
630-942-4285 (ph) | 630-942-2297 (fax)

x

From: McGowan, Ellen <mcgowan@cod.edu>
Sent: Thursday, June 10, 2021 7:25 PM
To: Humphrey, Vera <humphreyv@cod.edu>
Cc: Sekerka, Joyce <sekerkaj@cod.edu>
Subject: Manual Check Request Minniti, Stephanie and Cronin, Jana

Hi Vera,
Please ask Ellen R to approve the two attached check requests for processing on 6/16/21.
Please forward to Payables when done.
Thank you.

Ellen McGowan
Business Manager
McAninch Arts Center
College of DuPage
425 Fawell Boulevard
Glen Ellyn, IL 60137
Phone 630.942.3009
Fax 630.942.3002

[attachment: Cronin Jana Frida Group Refund MCA Suburban 400.00 CHECK REQUEST FORM 06-10-21.pdf]

[attachment: Minniti Stephanie Frida Group Refund Young Art Historians 320.00 CHECK REQUEST FORM 06-10-21.pdf]

Cronin, Jana

College of DuPage - Accounts Payable
Check Request Form
revised 1/29/2021

This form may be used to request check payments **only for those items for which the issuance of a purchase order would not be appropriate**. Attach supporting documentation (e.g., invoice or agreement). Please refer to **Vendor Payment - Non-Purchase Order Procedure No. 10-65**

Date: 6/10/2021
Vendor ID: 0639687

Invoice Number	Fund	Func.	Dept.	Object	Object Descrip.	Amount
Cronin-061021	05	60	11999	4509034	Ticket Rev Professional- MAC	\$ 400.00

Grand Total \$ 400.00

AP VERIFIED

Check the appropriate box below and sign

☒ **We**, the undersigned, hereby certify that the goods/services for which payment is herein requested have been provided in a satisfactory condition/manner. Consequently, payment is appropriate at this time.

☐ **We**, the undersigned, hereby certify that the goods/services, for which payment is herein requested, have not yet been provided. The first approver indicated below will notify the Accounts Payable Office in writing when the goods/services have been delivered in a satisfactory condition/manner.

Payee Name:

Other
Instructions:

Manual Check 6/16/21. Please mail.

Payee Address:

Description on Check:

Frida Group Ticket Refund-MCA Suburban PV Account# 52461947

Approvals:

Prepared By:

Ellen McGowan

Approved By:

Ellen McGowan

Date:

Signature:

APPROVED
By Ellen McGowan at 7:17 pm, Jun 10, 2021

Signature:

APPROVED
By Ellen McGowan at 7:17 pm, Jun 10, 2021

Payment Due:

06/16/21

Approved By:

Date:

Board Approved Date:

Signature:

Approved By Division VP:

Date:

Signature:

Ellen M. Roberts

6.10.2021

Return Approved Request and All Supporting Documents to: Accounts Payable (SRC 2132 A), acctpay@cod.edu

College of DuPage - Accounts Payable

Check Request Form

Notes:

Processing a Check Request

To expedite the processing of a Check Request, or other non-purchase order disbursement, the requesting department should:

1. Verify that the vendor intake process has been completed by the Purchasing Department. Payment cannot be made to a vendor until this process has completed.
2. Complete and review this Check Request Form and confirm that all relevant supporting documentation is attached.
3. Ensure the payee information is complete and includes the vendor's Colleague ID number.
4. Ensure that the General Ledger Account number is included and correct.
5. Maintain a copy of the approved Check Request Form for department records.
6. Submit the completed Check Request Form to the Accounts Payable Department.

The Check Request Form will be returned to the Authorized Signer if the information is incomplete, not in compliance with College Policy, or if budget is not available.

From: [Kazmierski, Katrina](#)
To: [McGowan, Ellen](#); [Wash, Elise](#); [Gosling, James](#); [Elges, Julie Ann](#)
Subject: Check Refund
Date: Wednesday, April 21, 2021 4:30:36 PM

Hello all,

I have a group that needs a check cut for a refund. They were also wondering if we can change the address it will be mailed to or not.

The group is: MCA Suburban
Order Contact: Dorothy O'Reilly
Account #: 52461947

Check Amount: \$400

Address they would like the refund mailed to (the groups treasurer who mailed the original check):



Let me know!

Kat Kazmierski
Graphic Design & Group Sales Coordinator
McAninch Arts Center
425 Fawell Blvd
Glen Ellyn, IL 60137
Phone: 630.942.3026
<http://www.atthemac.org/group-sales/>

College of DuPage - Accounts Payable
Check Request Form
revised 1/29/2021

This form may be used to request check payments **only for those items for which the issuance of a purchase order would not be appropriate**. Attach supporting documentation (e.g., invoice or agreement). Please refer to **Vendor Payment - Non-Purchase Order Procedure No. 10-65**

Date: 6/10/2021
Vendor ID: 1633671

Invoice Number	Fund	Func.	Dept.	Object	Object Descrip.	Amount
Minniti-061021	05	60	11999	4509034	Ticket Rev Professional- MAC	\$ 320.00
Grand Total						\$ 320.00

Check the appropriate box below and sign

- ☒ **We**, the undersigned, hereby certify that the goods/services, for which payment is herein requested, have been provided in a satisfactory condition/manner. Consequently, payment is appropriate at this time.
- ☐ **We**, the undersigned, hereby certify that the goods/services, for which payment is herein requested, have not yet been provided. The first approver indicated below will notify the Accounts Payable Office in writing when the goods/services have been delivered in a satisfactory condition/manner.

Payee Name:

Payee Address:

Other
Instructions:

Manual Check 6/16/21. Please mail.

Description on Check:

Frida Group Ticket Refund-Young Art Historians PV Account# 52475327

Approvals:

Prepared By:

Ellen McGowan

Signature:

APPROVED
By Ellen McGowan at 6:34 pm, Jun 10, 2021

Payment Due:

06/16/21

Board Approved Date:

Approved By:

Ellen McGowan

Date:

Signature:

APPROVED
By Ellen McGowan at 6:34 pm, Jun 10, 2021

Approved By:

Date:

Signature:

Approved By Division VP:

Date:

Signature:

Eileen M. Roberts

6.10.2021

Return Approved Request and All Supporting Documents to: Accounts Payable (SRC 2132 A), acctpay@cod.edu

College of DuPage - Accounts Payable

Check Request Form

Notes:

Processing a Check Request

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1. Verify that the vendor intake process has been completed by the Purchasing Department. Payment cannot be made to a vendor until this process has completed.
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3. Ensure the payee information is complete and includes the vendor's Colleague ID number.
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6. Submit the completed Check Request Form to the Accounts Payable Department.

The Check Request Form will be returned to the Authorized Signer if the information is incomplete, not in compliance with College Policy, or if budget is not available.

From: [Kazmierski, Katrina](#)
To: [McGowan, Ellen](#)
Cc: [Elges, Julie Ann](#); [Gosling, James](#); [Wash, Elise](#)
Subject: Frida Refund Check Request
Date: Thursday, April 29, 2021 4:09:45 PM

Hello again,

I have another group that needs a check cut for a refund. Here is the info:

Group: Young Art Historians

PV Account #: 52475327



Amount: \$320.00

Kat Kazmierski

Graphic Design & Group Sales Coordinator

McAninch Arts Center

425 Fawell Blvd

Glen Ellyn, IL 60137

Phone: 630.942.3026

<http://www.atthemac.org/group-sales/>