

Information:

Drawer: Finance

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

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

Invoice Number: C910250

Invoice Date:

PO Number:

Check Number: 0283815

Check Amount: \$ 900.00

Check Date: 08/17/2021

Voucher Number: V0692280

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

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From: McGowan, Ellen <mcgowan@cod.edu>  
Sent: Wed Jul 21 18:41:37 CDT 2021  
To: invoicing@cod.edu  
CC:  
Subject: Donahue, Kyle ICA 900.00 Payment 2  
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Please process the attached ICA. 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: Donahue, Kyle ICA CT22\_Charlie Payment 2 07-15-21 Signed.pdf]  
[attachment: Donahue, Kyle W9 2021.pdf]

**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.

482 Choreographer  
 CT22\_CHARLIE

VENDOR NUMBER

1479385

ACCOUNT NUMBER/AMOUNT

FUND	FUNCTION	DEPARTMENT	OBJECT	AMOUNT
01	30	12271	5309004	900.00

APPROVED—Supervisor, Purchasing

DATE

**AGREEMENT APPROVED**  
**JOYCE SEKERKA 7.22.21**

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

Name Kyle Donahue

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

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

Phone Number

(312) 531-0294

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

Street

2687 Berkshire Drive

City, State, Zip Code

Geneva, IL 60134

Agrees to perform on

June 11-July 15, 2021

DATE (S)

the following services for the College of DuPage:

Choreographer for College Theater Production of You're a Good Man, Charlie Brown.  
 Payment 2 of 2

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

The sum of \$ 900.00 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.

*Ellen McGowan*

DEPARTMENT AUTHORIZED SIGNATOR

05/10/2021

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

05/10/2021

**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 after completion of the contractual service.)

**APPROVED**

By Ellen McGowan at 6:39 pm, Jul 21, 2021

COLLEGE AUTHORIZED SIGNATURE

DATE

*[Signature]*

COUNTER SIGNATOR (OPTIONAL)

DATE

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

**Request for Taxpayer  
Identification Number and Certification**► Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.**Give Form to the  
requester. Do not  
send to the IRS.**

1. Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.

**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 for Part II, later.

**Sign  
Here**Signature of  
U.S. person ►

Date ►

6/9/21

**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.*