

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1635775

Vendor Name: Lisa D'Ambrose

Invoice Number: 081121

Invoice Date: 08/11/21

PO Number:

Check Number: 0284745

Check Amount: \$ 300.00

Check Date: 09/14/2021

Voucher Number: V0695677

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

Document Below

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From: Dietz, Teresa <norrist@cod.edu>  
Sent: Fri Aug 27 15:47:42 CDT 2021  
To: invoicing@cod.edu  
CC: millermo@cod.edu  
Subject: GenCyber Teacher Stipend  
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Please process the attached check request.

Teresa Dietz  
Program Support Specialist  
Business and Applied Technology  
College of DuPage  
630-942-3997

[attachment: 2021 Check Requests\_Teacher Stipends\_Dean Signature L Dambrose.pdf]

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

**APPROVED**  
**By Ben Ho at 12:29 pm, Aug 16, 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: 8/11/2021  
Vendor ID: 1635775

Invoice Number	Fund	Func.	Dept.	Object	Object Descrip.	Amount
See Grant Proposal	06	10	02737	5309001	Other Contractual Services Exp	\$300.00

**AP VERIFIED** Grand Total  
**08/30/21 - MARIA ZERRUDO**

\$300.00

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.

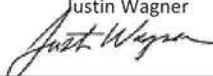
Payee Name: D'Ambrose, Lisa Other Instructions:  
Payee Address: 2248 Hobson Rd  
Downers Grove, IL 60516

Description on Check:

Teacher Stipend for GenCyber Teacher Camp 6/7/2021-6/18/2021

Approvals:

Prepared By: Justin Wagner  
Signature:  
Payment Due: Upon Approval  
Board Approved Date:

Approved By: Justin Wagner Date: 8/11/2021  
Signature:   
Approved By: Kris Fay, Dean, Bus. & App. Tech. Div. Date:  
Signature: **Kris Fay** Digitally signed by Kris Fay  
Date: 2021.08.25 17:09:06 -05'00'  
Approved By Division VP: Date:  
Signature:

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