

University Finance Office

Approving Manager Signature

ACCOUNTS PAYABLE - GUEST SPEAKER/HONORARIUM FORM

Please attach the flyer for the related guest speaker event

<u>Speaker Information:</u>					
Speaker Name:	SS	SSN:			
Home Address:					
City:	State:	Zip Co	ode:		
E-Mail Address:		Phone#:			
Program/Event/Presentation I	<u>Information:</u>				
Program Name:					
Program Date:	Program Locat	ion:			
Honorarium Amount:					
Travel Expenses:		Total Amount:			
Note: To be reimbursed for expenses to the IRS for tax reporting purposes		tached. A 1099 for pay	ment of servi	ces will be issued	
Factors to be Considered for He	onorarium:		\$7	N	
 The speaker is hired for a specific e The speaker is a current employee The speaker is being hired on a cor The speaker is a "Nonresident Alie 	ntinuing, recurring, or long-t		Yes	No	
Authorization:					
Preparer Print Name		Cost Cer	Cost Center		
Preparer Signature	Phone #.		Date		
Approving Manager Print Name					

Phone #.

Date