



# The University of Georgia

## Accounts Payable Honoraria and Fees Information Sheet

(1) University Purchase and Check Request Number

(2) PAYEE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(3a) INDIVIDUAL - SSN \_\_\_\_\_

(3b) Check One:  US Citizen  Permanent Resident Alien

\* Do not use this form for non resident alien payments or payments for services outside the US. Please use the appropriate payment forms.

(4) COMPANY - Federal Employer Identification Number

(5) Fee For Services Rendered \$ \_\_\_\_\_

Reimbursable Expenses (Where Separately Stated) \$ \_\_\_\_\_

Total Amount To Be Paid \$ \_\_\_\_\_

(6) TYPE OF SERVICE:

\_\_\_\_\_ Architect \_\_\_\_\_ Engineer

\_\_\_\_\_ Attorney \_\_\_\_\_ Visiting Lecturer

\_\_\_\_\_ Physician \_\_\_\_\_ Prospective Employee Travel

\_\_\_\_\_ Veterinarian \_\_\_\_\_ Other \_\_\_\_\_

(7) Date(s) of Service(s) Performed \_\_\_\_\_

(8) Description of Service(s) Performed: \_\_\_\_\_

(9) Signature \_\_\_\_\_ Date \_\_\_\_\_  
(Signature not required if invoice is attached)

The above services were purchased in accordance with provisions of the University's Administrative Policies and Procedures Manual.

(10) Signature \_\_\_\_\_ Date \_\_\_\_\_  
*Approved for Payment*

