

PAYMENT REQUEST FORM

School / College / Division Name		Cost Center Name & Number	
What type of transaction is this? Please select ONE (1) option only:			
<input type="checkbox"/> Administrative Fees		<input type="checkbox"/> Other Liability (for Auxiliary Use Only)	
<input type="checkbox"/> Legal Settlements		<input type="checkbox"/> Standardized Patient	
<input type="checkbox"/> Tuition		<input type="checkbox"/> Non-Employee Travel Reimbursement	
<input type="checkbox"/> Utilities		<input type="checkbox"/> Student Travel Reimbursement	
<input type="checkbox"/> Risk and Insurance		<input type="checkbox"/> Student Stipend	
Stipend Payment Payment Required Details:			
Is the Recipient a HU Employee? Yes <input type="checkbox"/> No <input type="checkbox"/>		Is the Recipient a US Citizen? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Is the Recipient a HU Student? Yes <input type="checkbox"/> No <input type="checkbox"/>		Did the Recipient Perform Services or Work? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Stipends are payments to individuals as a scholarship, fellowship, financial assistance grant, training grant, or other contribution to support training expenses. This support can include tuition, living costs, and other incidental expenses which will enhance the individual's level of competence in a particular area, and which may or may not be accompanied or supplemented by a full or partial tuition waiver. STIPEND PAYMENTS DO NOT CREATE AN EMPLOYMENT RELATIONSHIP, SINCE NO SERVICES WERE REQUIRED. ALL STIPEND PAYMENTS ARE SUBJECT TO THE AD HOC PAYMENT POLICY.			
Please provide the purpose or nature of the payment. Include all applicable dates of service and be as specific as possible. All relevant supporting documents must accompany this form.			
FOR U.S CITIZENS AND PERMANENT RESIDENT ALIENS		FOR NON-RESIDENT ALIENS	
Is a completed and signed W-9 form already on file with the Office of Procurement? <input type="checkbox"/> YES <input type="checkbox"/> NO		"This section is to be completed by the HU Non-Resident Alien Tax Specialist" <input type="checkbox"/> Taxable <input type="checkbox"/> Non-Taxable	
If "No" please submit a W-9 Form via e-mail to accountspayable@howard.edu			
REQUESTOR - TYPE or PRINT		REQUESTOR - SIGNATURE	
MONTH / DAY / YEAR	TELEPHONE NUMBER	E-MAIL ADDRESS	
SUPPLIER/RECIPIENT NAME AND ADDRESS		AMOUNT	
SUPPLIER ID / STUDENT ID	COST CENTER / PROJECT NUMBER	SPEND CATEGORY	
GRANT WORKTAG/GIFT WORKTAG/PROJECT WORKTAG		SPEND AUTHORIZATION ID	
PRINCIPAL INVESTIGATOR (provided PI's signature is required)			
TYPED / PRINTED NAME	SIGNATURE	TITLE	
COST CENTER APPROVAL			
TYPED / PRINTED NAME	SIGNATURE	TITLE	
SPONSORED PROGRAM APPROVAL (for grants only)			
TYPED / PRINTED NAME	SIGNATURE	TITLE	