

## OFFICE OF THE CONTROLLER

2244 10TH Street, N.W. Suite 300, Washington, DC 20059 Telephone 202 806-2300

## **PAYMENT REQUEST FORM**

What type of transaction is this? Please select ONE (1) option only:    Administrative Fees	School / College / Division Na	me	Cost Center Name & Number			
John Carliage   Other Liability (for Auxiliary Use Only)						
Justice   Street	What type of transaction is this? Please select ONE (1) option only:					
Standardized Patient   Intition   Non-Employee Travel Reimbursement   Student Travel Reimbu						
Student Travel Reimbursement   Student Stipend   Student S	<del></del> -					
Student Travel Reimbursement   Student Stipend   Student S	[ ] Tuition	Non-Emplo	yee Travel Reimbursement			
Stipend Payment Payment Required Details:  sthe Recipient a HU Employee? Yes   No	·		-			
Gift Cards						
Stipend Payment Payment Required Details:  s the Recipient a HU Engloyee? Yes No Bid the Recipient a US Citizen? Yes No  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 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 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 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 grant, grant grant grant, grant gran	·		, , , , , , , , , , , , , , , , , , , ,			
Is the Recipient a HU Employee? Yes No Is the Recipient a U Employee? Yes No State Recipient a HU Student? Yes No State Recipient Reform Services or Work? Yes No State Recipient Recip						
Sibends 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, linking 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 Is a completed and signed W-9 form aiready on file with the Office of Procurement?  If "No" please submit a W-9 form via e-mail to accountage/paide@howard.edu  REQUESTOR-TYPE or PRINT  REQUESTOR-TYPE or PRINT  REQUESTOR-TYPE or PRINT  SUPPLIER ID /STUDENT ID  COST CENTER / PROJECT NUMBER  SUPPLIER ID / STUDENT ID  COST CENTER / PROJECT NUMBER  SUPPLIER ID / STUDENT ID  COST CENTER / PROJECT NUMBER  TITLE  COST CENTER APPROVAL	1 -					
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SUPPLIER ID / STUDENT ID  COST CENTER / PROJECT NUMBER  SIGNATURE  SIGNATURE  PRINCIPAL INVESTIGATOR (provided Pi's signature is required)  TYPED / PRINTED NAME  COST CENTER APPROVAL	I	-				
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FOR U.S. CITIZENS AND PERMANENT RESIDENT ALIENS   Is a completed and signed W-9 form already on file with the Office of Procurement?   This section is to be completed by the HU Non-Resident Alien Tax Specialist*   Two* please submit a W-9 form via e-mail to accountspayable@howard.edu   REQUESTOR - TYPE or PRINT   REQUESTOR - SIGNATURE	Sin the Farment section and an entire at the content repaired white negatives are section and an entire at the farment of the section and the					
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Non-Taxable				"This section is to be completed by the HU Non-Resident Alien Tax Specialist"		
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