

Instructions: This form is used to pay an *individual* who provided your group a service (i.e.- photographer, speaker, choreographer, etc.). Please allow 15 business days for payment to process; this timeframe is contingent upon documents that are correctly filled out.

ALL fields must be filled out. SOAS will NOT accept incomplete forms!

Section 1: To be filled out by the Student Organization

Name of Student Org: _____ Today's Date: _____

Contact Name: _____ Phone# _____ Unique Name: _____

Description of Service: _____

Date(s) of Service: From: _____ To: _____

PAYMENT AMT:

SHORT CODE or Project Grant to be charged:

Section 2: Information of person who is providing the service. (Payee)

Last Name _____ First Name _____ Middle Initial _____
 Mailing Address _____ City _____ State _____ Zip _____
 Phone# _____ (Required) Email: _____ (Required) Fax: _____
 Foreign address: _____

Student Yes No UMID# Required for students, staff and faculty

Citizenship Information:

U.S. Citizen Yes No *(If NO and claiming tax exemption, must also submit IRS form 8233)*
 Resident Alien Yes No *(If YES, must also submit Alien Certificate)*

Were services performed outside of the U.S.? Yes No

Employment Information (Please check one of the following)

- Individual is **currently employed** as a regular or temporary employee of University of Michigan
- Individual is not **currently** employed at University of Michigan but **was employed** during the past 12 months
- Individual is **not** employed at University of Michigan

If employed: Job title _____ Home dept. _____

A Substitute W-9 is required if payee is not employed with U of M.