

INSTRUCTIONS TO ORIGINATOR:

- a. Complete Section I and if over \$500 forward to the Director of Human Resources for approval prior to event.
- b. Complete Section II upon completion of lecture.
- c. Is the Presenter/Lecturer a current SFSU employee:
 - Yes - Submit completed form to Human Resources.
 - No - Submit completed form to Accounts Payable (include a Vendor Data Record form or check cannot be issued).

SECTION I:	
1. College	_____
2. Department/Project	_____
3. Date, time and location of event	_____
4. Describe event and purpose of Honorarium	_____
5. Presenter/Participant/Recipient Name	_____
6. If for an individual <i>NOT an SFSU employee</i> , provide FMS chart field information:	
Account: _____ Fund: _____ Dept: _____ Program: _____ Class: _____ Project: _____	
If for an <i>SFSU employee</i> , provide appropriate position #: Agency _____ Unit _____ Serial No. _____	
7. Amount: \$	_____
8. I CERTIFY that the services listed are necessary to the sponsored activity and that there are sufficient funds available for this transaction.	
Dean/Director/PI	_____ Date _____
9. Director of Human Resources (if over \$500)	Associate Vice President, ORSP (if applicable)
Approved _____ Date _____	_____ Date _____

SECTION II:	
10. INVOICE for services rendered:	
I certify that I have completed the services as described in Section I, and I request payment in the amount indicated above as payment in full for services rendered. I ____ am ____ am not a current University employee.	
Signature of Presenter/Participant/Recipient	_____ SSN# _____
11. <input type="checkbox"/> Hold check for pick up at the Disbursement Office (Administration 351).	
<input type="checkbox"/> Please mail check to: (must be typed or printed)	
Name of Presenter/Participant/Recipient	_____
Address	_____
City _____ State/Zip _____	Phone # _____
12. I certify that the above services have been satisfactorily completed.	
Signature of Dean/Director/PI	_____ Date _____
Budget verification for ORSP (if applicable)	_____ Date _____