



Complete this form to request a payment to an individual for eligible payment types processed by our approved supplier Candex on behalf of the University. Include all supporting documentation, save the completed document as a PDF using the specified naming format, and submit it for processing.

### Recipient Information

*Full Name*

*Email Address*

### Engagement Details

*Description of Engagement (summarize the purpose or nature of the prize or award)*

*Role/Contribution (e.g., prize or award recipient)*

*Date(s) of Service*

*Amount*

*Accounting Codes or SpeedChart*

*SpeedChart Description*

### Foreign Individual

*Service Location (choose one)*

Performed in the United States

Performed outside the United States

*By signing, I confirm I have read the [Allowable Payments by Visa Type](#) and acknowledge the recipient qualifies for payment, subject to U.S. tax withholding unless exempt, or if services were performed outside the U.S.*

### Department Contact

*Submitted By*

*Phone Number*

*Department Name*

*Date Created*

***Digital Signature***

Adobe Digital ID or DocuSign ID