

**THE UNIVERSITY OF AKRON  
HONORARIUM AND EXPENSE AUTHORIZATION  
(NON-UNIVERSITY PERSONNEL)**

NAME \_\_\_\_\_  
 ADDRESS \_\_\_\_\_ DATES From: \_\_\_\_\_ To: \_\_\_\_\_

**TYPE OF SERVICE RENDERED**

LIST EXPENSES BY DAYS IN SEPARATE COLUMNS - IF MORE THAN FIVE DAYS USE ADDITIONAL SHEETS WITH ONE TOTAL

DATES							TOTAL
<b>COMMERCIAL TRANSPORTATION</b> - ie. Plane, Taxi, Shuttle, etc. (Attach original itemized receipts)							
Plane	to						0.00
	to						0.00
Other	to						0.00
	to						0.00
<b>LOCAL TRANSPORTATION</b> (Mileage) at current IRS rate. (Please use the check box to indicate roundtrip mileage)							
From	to	miles	<input type="checkbox"/>				0.00
From	to	miles	<input type="checkbox"/>				0.00
From	to	miles	<input type="checkbox"/>				0.00
<b>LODGING</b> - List and attach receipted bills							0.00
<b>MEALS</b> - If for more than one person show number							
Full Day							0.00
Breakfast							0.00
Lunch							0.00
Dinner							0.00
Special - Banquet, etc., - attach receipt or program							0.00
<b>OTHER</b> - Telephone, Registration, Etc. (Explain)							
							0.00
							0.00
							0.00
<b>HONORARIUM</b> - This will be reported to the appropriate taxing authorities.							0.00
<b>REMARKS OR EXPLANATIONS:</b>		DAILY TOTALS	0.00	0.00	0.00	0.00	0.00
							AMT. CLAIMED

I hereby certify that the expenses as detailed above have actually been incurred by me and are proper reimbursable items. In addition, I certify that I am not a regular employee of the University of Akron. I also certify that no expenses are included above for alcoholic beverages.

SIGNED \_\_\_\_\_ DATE \_\_\_\_\_

Social Security Number or Individual Taxpayer Identification Number (ITIN) \_\_\_\_\_

**IMPORTANT:** Is the Payee, or the Beneficiary of the payment, a U.S. Citizen or Permanent Resident Alien?  Yes  No  
 If **NO**, please contact the university's Tax Manager at 330-972-6566.

AMOUNT APPROVED

I certify that all the information is correct:

Signature and date \_\_\_\_\_  
 Project Director

Printed name/contact \_\_\_\_\_ ext. \_\_\_\_\_

Signature and date \_\_\_\_\_  
 Dean

CHARGE SPEEDTYPE(S)

7005

5703