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REQUEST FOR HONORARIUM

1. First Name: _____ 2. Last Name: _____

3. Banner ID: _____

4. Social Insurance Number: _____ 5. Date of Birth (DDMMYYYY): _____

6. Address to mail cheque to:

Street Address: _____

Unit/Apt. Number: _____

City: _____ Province: _____

Postal Code: _____

7. Amount to be paid:

- a. ____ \$35.00 Half day
- b. ____ \$50.00 Half day with preparation of Full day
- c. ____ \$100.00 Full day with preparation and responsibility
- d. ____ \$ ____ Justify: _____

8. Date(s) of services rendered: _____

9. State why this person has been invited and precisely what he or she will do:

I certify that the services were actually performed or, if this honorarium is being requested in advance, that it will only be presented when the services have been performed.

Date: _____ Originator (print name): _____

Signature: _____

Dept/Org. budget to be charged: _____

Date: _____ Approved (print name): _____

Signature: _____