

Prepared by

Date \_\_\_\_\_ Phone Number \_\_\_\_

INSTRUCTIONS: Use this form if this is a payment to an individual who is a professional who provided services of a consultant, artistic or entertainment nature. To qualify, the individual must not have been on the payroll of the University or any other agency of the State of Oklahoma at the time the services are provided. The work must be of the type for which the University stipulates only the desired objective or product; the individual is free to determine the process or procedure to achieve that objective. General, the individual should be an authority or recognized expert in the field of endeavor for which retained, and the service should be of a non-recurring nature. The service should not be available within the staffing of the University.

PO Number		_ Fund	Description	
Org	Description _		Program	
Contract /	Amount	_Name of R	ecipient	
Banner ID Number		Services Date(s)		
Type of w	ork			
	– PLEASE READ CA			
Northeaster	n State considers all h	onorarium payn	nents as compensation for Internal R	evenue Service reporting purposes. The
university w	ill send IRS form 1099	miscellaneous	income statements to all recipients a	s required by Internal Revenue Service
regulations.	It will be the recipient's	s responsibility	to retain the necessary documentation	on to use as a deduction from gross income. If
you have ar	ny questions, contact th	ne Office of Bus	iness Affairs.	
RECIPIENT	'S CERTIFICATION			
Any person	who is an employee of	f the state of Ok	lahoma is prohibited from contracting	g for professional or non-professional services
with Northe	astern State University			
Please sign	the following certificat	ion:		
I hereby cer	tify that I am not an en	nployee of the s	tate of Oklahoma as of the performa	nce date of this contract.
Recipient	's Signature		C	Date
Recipient	's Complete Mailin	g Address		
Account S	Sponsor Name			-
Account S	Sponsor Approval _			Date
Business Affairs Approval				Date

Revised April 2013