

## Texas Christian University Honorarium (Payment for Services) Request

This document must be completed prior to issuing payment. Submit completed form to Accounts Payable, Sadler Hall #2011, TCU Box 297011.

| Γ  |                          |                   |                     |                   |     |            |  |  |  |
|--|--------------------------|-------------------|---------------------|-------------------|-----|------------|--|--|--|
|  | Mail Check:              | ✓ Pick Up         | Check               |                   |     |            |  |  |  |
| Name   | Walter White             | 9                 |                     |                   |     |            |  |  |  |
| Tax ID # or SSN #  |                          |                   | Internationa        | I: Yes            | V   | <b>1</b> 0 |  |  |  |
| Permanent Address  | 3708 Negra Arroyo Lane   |                   |                     |                   |     |            |  |  |  |
|  | Fort Worth,              | TX 76129          |                     |                   |     |            |  |  |  |
| Amount   | 382.2                    |                   |                     |                   |     |            |  |  |  |
|  | Account                  | Fund              | Dept                | Project           |     |            |  |  |  |
| Authorized Codes   |                          |                   |                     |                   |     |            |  |  |  |
|  |                          |                   |                     |                   |     |            |  |  |  |
| Approver's Name:   |                          |                   |                     |                   |     |            |  |  |  |
| Approver's Signature:  |                          |                   |                     |                   |     |            |  |  |  |
| 1. Attach a copy of written agree  | <u> </u>                 |                   | <u> </u>            |                   |     |            |  |  |  |
| For SuperFrog appearance   | s made between t         | ne dales 2023     | -12-01 and 202      | 3-1 <i>2-</i> 20. |     |            |  |  |  |
|  |                          |                   |                     |                   |     |            |  |  |  |
|  |                          |                   |                     |                   | YES | NO         |  |  |  |
| 2. Is this individual presently in th<br>- <b>Zh\ Y`Ubgk Yf`lc`ei Ygl·]cb`&amp;</b> `]g'″i |                          | -                 | •                   |                   | ~   | Ш          |  |  |  |
| 3. Must this individual comply with  | _                        |                   |                     |                   |     |            |  |  |  |
| 4. Is this individual trained by the University to perform the service?                    |                          |                   |                     |                   |     |            |  |  |  |
| 5. Is the service similar to service   | s generally performed    | by other Univers  | ity employees?      |                   |     |            |  |  |  |
| 6. Is this individual assigned a Un  | iversity employee to a   | ssist him or her? |                     |                   |     |            |  |  |  |
| 7. Does this individual perform the  | e same service for the   | University on a f | requent basis?      |                   |     |            |  |  |  |
| 8. Does the University supply the  | tools, materials and s   | upplies necessar  | y to complete the a | ssignment?        |     |            |  |  |  |
| 9. May this individual determine h   | is or her own working    | hours?            |                     |                   |     |            |  |  |  |
| 0. Does this individual market his   | s or her services to the | general public?   |                     |                   |     |            |  |  |  |

After a review of the answers presented above, it may be necessary to classify the individual as an employee and issue the payment on a payroll check with applicable taxes withheld.



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|  | Mail Check:              | ✓ Pick Up         | Check               |            |          |    |
|--|--------------------------|-------------------|---------------------|------------|----------|----|
| Name   | Kendall Roy              |                   |                     |            |          |    |
| Tax ID # or SSN #  |                          |                   | International       | : Yes      | <b>V</b> | ٧o |
| Permanent Address  | 123 Waysta               | ar Dr             | _                   |            |          |    |
|  | Fort Worth,              |                   |                     |            |          |    |
| Amount   | 772.0                    |                   |                     |            |          |    |
|  | Account                  | Fund              | Dept                | Project    |          |    |
| Authorized Codes   |                          |                   |                     |            |          |    |
| Approver's Name:   |                          |                   |                     |            |          |    |
| Approver's Signature:  |                          |                   |                     |            |          |    |
| Attach a copy of written agree  For SuperFrog appearance   | <u> </u>                 |                   |                     |            |          |    |
|  |                          |                   |                     |            | YES      | NO |
| 2. Is this individual presently in the   |                          | •                 | ·                   |            | <b>V</b> | Ш  |
| <b>-Zh Y'Ubgk Yf'hc'ei Ygh]cb'&amp;']g</b> '″<br>3 Must this individual comply wit   | _                        |                   |                     |            |          |    |
| <ol> <li>Must this individual comply with instructions about when and how services are performed?</li> <li>Is this individual trained by the University to perform the service?</li> </ol> |                          |                   |                     |            |          |    |
| 5. Is the service similar to service   | es generally performed   | by other Univers  | sity employees?     |            |          |    |
| 6. Is this individual assigned a Ui  | niversity employee to a  | ssist him or her? |                     |            |          |    |
| 7. Does this individual perform th   | e same service for the   | University on a f | requent basis?      |            |          |    |
| 8. Does the University supply the  | tools, materials and s   | upplies necessar  | y to complete the a | ssignment? |          |    |
| 9. May this individual determine l   | nis or her own working   | hours?            |                     |            |          |    |
| 10. Does this individual market hi   | s or her services to the | e general public? |                     |            |          |    |

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