

# HONORARIUM RECIPIENT REQUEST

Instructions: Complete this form and provide a **copy of flyer or announcement of lecture, panel discussion, or invitation letter** as support documents for request. [Honoraria Guidelines](#)

**Note:** If the honorarium recipient is individual on record as a current **UC Berkeley employee or another UC Location**, please contact [ersohrops@erso.berkeley.edu](mailto:ersohrops@erso.berkeley.edu) for further guidance (this form is **not** required).

## INFORMATION ABOUT RECIPIENT

Vendor ID# (if available): \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Zip: \_\_\_\_\_

If Foreign National - Country: \_\_\_\_\_ Visa Type: \_\_\_\_\_

The dates of activity at the University of California will be from \_\_\_\_\_ to \_\_\_\_\_

Amount of Payment: \_\_\_\_\_

## CERTIFICATION

I certify that the information contained on this form is to the best of my knowledge and belief, true and complete.

Signature of Honorarium Recipient or Responsible Department: \_\_\_\_\_

Date: \_\_\_\_\_

**Approval** (Dean, Department Chair, VCR, or Unit Directors, delegated by VCR)\*

Signature: \_\_\_\_\_

Name/Title (printed): \_\_\_\_\_

Date: \_\_\_\_\_

*\*For payments of \$10K or less; payments in excess of \$10,000 will require advance written approval by the Executive Vice Chancellor and Provost.*