UC RIVERSIDE
School of Medicine

Honorarium Request Form

Eligibility: Honorarium payments are granted to individuals in recognition of a special service or distinguished achievement for which propriety precludes setting a fixed price such as: special lecture seminars, participation in a workshop or panel discussion, guest speakers, and similar participation in scholarly and professional activities.

All payees must be set up as a supplier in Oracle. Please reference the guides below for further information.

Requesting DocuSign-Eligible Suppliers.pdf - Google Drive

Mandatory Federal and State Tax Forms for Supplier / Payees

PAYEE INFORMATION	UC Employees, whether on this campus or another UC campus must be processed through payroll. Contact SOM Human Resources
Name:	Is payee a UC Employee: ◯ Yes ◯ No
Address:	Email:
City, State, Zip:	Phone:
Country:	Department:

PAYMENT

Please indicate if payment will need to be sent by check (domestic mail) or by wire transfer (foreign addresses ONLY)

Check Payment: ◯ Yes ◯ No	Wire Transfer: ◯ Yes ◯ No

EVENT INFORMATION

Name:	Type:
Date(s):	Location:

* DETAILS ABOUT THE EVENT this is a required field. Additionally, attach agendas, flyers, and/or brochures from the event.

Allowable Rates:

Maximum $2500 per payee per event unless exceptionally approved by the Dean

COA & APPROVALS

Entity	Fund	Activity	Account	Function	Program	Project	Flex 1	Flex 2	Amount

Principal Investigator (PI) (Print Name   Signature   Date   SRP Signature   Date

FAO/ Department Head (Print Name)   Signature   Date

BUSINESS OPERATIONS USE ONLY: **Exceptional Approvals**   *Required if over the allowed amount per event*

Controller & Budget Director (Print Name)   Signature   Date

Dean (Print Name)   Signature   Date