

NORTHWESTERN UNIVERSITY

PAYMENT PACKET

For

U.S. CITIZEN/U.S. RESIDENT

VISITORS

Revised December, 2001

N O R T H W E S T E R N

U N I V E R S I T Y

Northwestern University would like to take this opportunity to thank you for agreeing to perform services on behalf of the University. We would like to assist you in preparing the appropriate paperwork to compensate you in an expeditious manner. This packet contains the required forms and instructions to process your payment in accordance with U.S. regulations on taxation and payment authorization.

In engaging you, the supervisor or hiring department has assessed the characteristics of the services you are to provide to determine if the work qualifies as that of an independent contractor or as that of an employee. This is important for purposes of withholding income taxes, provision of employee benefits, and other legal requirements. The term “consultant” has special applicability to sponsored projects and the University standards for the identification of consultants and payment of their fees to satisfy federal government requirements.

Before completing the forms, please consider the following guidelines:

1. If you are not a U.S. citizen or U.S. resident please contact your University representative to initiate the required payment process for non-residents and non-citizens.
2. If you have been paid as an employee on the Northwestern University payroll within the previous twelve months, you must be paid as an employee for the services you are to perform.
3. If you are to be paid according to your corporate affiliation, or Federal Employer Identification Number (FEIN) please contact your University representative. The following forms are necessary for independent contractors or individual consultants who are to be paid based upon their Social Security Number or Taxpayer ID.

Prior to commencement of services, please complete and return the following documents to your University representative. These forms are necessary to provide appropriate documentation such that the University may comply with Federal guidelines for engaging and paying independent contractors and consultants.

- Vendor Code Request Form for Individuals: If you have not been paid during the current calendar year, please complete Sections 1 and 2 of this form, including correct Social Security Number or Taxpayer Identification Number, correct address to ensure proper check delivery, and your signature attesting that you are a U.S. citizen or U.S. resident.
- Contracted Services Form for Residents – You are to complete and sign the top half of the enclosed form. If you are to receive subsequent payments, the department will coordinate your payments with you when you arrive.

Also, upon completion of services, please provide to your University representative:

- Visitor's Travel Expense Report (Visitor's T&E) (if applicable) – If reimbursements were part of the original agreement between you and the University representative, please itemize expenses using this form. Original receipts must be attached to the Visitor's T&E.
- Invoice for Services

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U N I V E R S I T Y

In summary, prior to commencement of services please complete and sign both the 'Vendor Code Request Form for Individuals' and the 'Contracted Services Form for Residents'. Return these forms to your hiring department, keeping a copy for your records.

After services are completed submit an Invoice and the Visitor's T&E if applicable. Payment will be processed within (5) business days.

We understand that the expertise that you bring to Northwestern is of great value, so we would like your relationship with the University to be as productive and enjoyable as possible. If you require assistance please feel free to contact the individuals listed below:

Guy Wilson
Manager, Accounts Payable
2020 Ridge, 2nd Floor
Evanston, IL 60208-4320
(847) 491-4445

Nancy Pinchar
Assistant Director, Accounting Services
619 Clark Street, Room 217
Evanston, IL 60208-4320
(847) 491-4724

Northwestern University

Vendor Code Request Form for INDIVIDUALS

Use this form to ADD or UPDATE information for U.S. non-employees to be paid through Accounts Payable in the financial system. First determine if the individual should be processed through Payroll instead; see below. Confirm that a vendor code does not already exist and/or verify the accuracy of data already entered. Errors in the vendor database may result in financial liability to the payee and the department requesting payment. This form must be **completely** filled in and legible, and must include the correct SSN or TIN. If completed correctly, entry into the system will be up to two (2) working days. Fax or mail this form to POPS. The following guidelines are important:

- **This form must be completed and signed by each U.S. citizen/U.S. resident requesting payment, including students, except employees**
- **Requests to add employees may be submitted in writing via E-mail or fax, including the information shown below.**
- **Payments to NON-RESIDENT ALIENS must be processed through Payroll; vendor codes will not be established.**
- **Except for reimbursements for business expenses, ALL EMPLOYEES providing services in addition to their regular job responsibilities MUST be processed through Payroll.** *Contact Payroll at 1-7362 for more information.*
- **Codes for companies (FEIN) should be requested via e-mail or fax to POPS; or using the 'Vendor Code Request Form for Companies' which enables multiple vendor code requests per page:** <http://nuinfo.nwu.edu/finsys/polcydoc/venmenu.htm>

For additional information see the Financial Systems website at <http://www.nwu.edu/finsys/polcydoc/plcymenu.htm> or contact POPS.

1. Identification number, name, and address. (REQUIRED INFORMATION)

Social Security Number (SSN) or Taxpayer Identification Number (TIN) = _____ - _____ - _____

Name= _____
- list the last name first and then as much of the first name that fits

Address= _____

City= _____ State= _____ Zip= _____ - _____

Telephone Area Code= _____ Number= _____ - _____ Extension= _____

Fax Area Code= _____ Number= _____ - _____

2. Signature and Payment Information (REQUIRED INFORMATION)

“I attest that I am a U.S. citizen or U.S. resident.”

Signature _____

The signature of the individual to be added to the vendor database is required.

Purpose of payment= _____ Consulting/Speaker Fees/Services _____ Honorarium _____ Reimbursement _____ Other

Description _____

3. Responsible Department Information. (REQUIRED INFORMATION)

Name= _____ Department= _____

Date= _____ Phone= _____ Fax= _____

For POPS use only. HRIS review _____ Date processed= ____ / ____ / ____ Initials= _____ **Rev 5/99**

**NORTHWESTERN UNIVERSITY
VISITOR'S TRAVEL EXPENSE REPORT**

Name	Social Security Number
Address	Business Purpose:
	Inclusive Dates of Travel
Telephone Number:	From: To:

ITEM AND DESCRIPTION <small>(Receipts should be submitted for all claimed expenses. Original receipts are required for all expenses \$25 and over.)</small>	AMOUNT
Air (Coach rate; attach original passenger receipt)	
Rail (Attach original passenger receipt)	
Ground Transportation: (Taxi, etc., attach original receipts and incl tip)	
Automobile: Miles @ 0.445 \$ - Parking Tolls	\$ -
Other: (Rental car, etc.) (Explain and attach original receipts)	
Hotel Room & Tax (May not exceed \$225 plus tax per night) - (Attach original hotel voucher)	
Meals (Dinners may not exceed \$50 per night, incl. tax and tip) (Attach original receipts)	
Incidentals (Gratuities and other misc. items) (Attach original receipts)	
TOTAL EXPENSE	\$ -

I certify that I have paid out the amounts listed for Northwestern University-related activities and that I am not being reimbursed for these expenses by any other organization

_____ Signature	_____ Date
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FOR NORTHWESTERN UNIVERSITY USE:

Payment Request Number _____

Fund	Area	Org	Sub Org	Object	Sub Obj	Amount
						\$ -

APPROVAL

I certify that these expense were incurred for University related activities . and approve them as proper charges to University accounts

_____ Dean or Supervisor	_____ Date
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