

Honorarium Recipient Form

Is the Payee a State of Maryland Employee?	Choose one:
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IMPORTANT:
If the Payee is a State of Maryland Employee, do not use this form.
Contact your HR Rep or your [Payroll Rep](#) for payment instructions.

Payee Information			
Name			
Address			
Social Security Number		Amount	

Description of Services			
Date of Services			

I confirm that I am a U.S. Citizen or U.S. Permanent Resident; I have provided the services listed above; and I agree to the amount stated above.

Recipient's Signature	
Date	

Request a NONPO State payment in Quantum Financials.
Submit this Form and the Memo authorizing payment on Department letterhead [here](#).
Submit the W9 [here](#).