

**BROWN UNIVERSITY**  
**GUEST SPEAKER PAYMENT AUTHORIZATION**  
 (Use for guest speakers in an amount of \$2,000 or less)

<b>Name:</b>	
<b>Mailing Address:</b>	<b>Home Address (required):</b>
<b>Description of engagement :</b>	
<b>Location of Services:</b>	<b>On-Campus:</b> <input type="checkbox"/> <b>Off-Campus:</b> <input type="checkbox"/>
<b>Fee for services:</b>	<b>Expenses:</b>
<b>Total Fee and Expenses:</b>	<b>Date(s) of Service:</b>
<b>US Citizen:</b> Yes <input type="checkbox"/> No <input type="checkbox"/>	(For non-resident aliens only):
<b>Brown Employee:</b> Yes <input type="checkbox"/> No <input type="checkbox"/>	<b>Visa Type:</b>
	<b>IRS Form 8233 attached?</b> Yes <input type="checkbox"/> No <input type="checkbox"/>

Departmental payment authorization certifies that the above activity was satisfactorily completed, necessary to the accomplishment of the goals of the account charged and that the expense is reasonable in relation to the benefit derived.

**PAYMENT AUTHORIZATION**

<b>CONTROLLER APPROVAL</b>				<b>AUTHORIZED DEPARTMENT SIGNATURE</b>		
TO BE FILLED IN BY ORIGINATING DEPARTMENT				CONTROLLERS USE ONLY		
VENDOR NO.	ACCOUNT CODE	ACCOUNTING DESCRIPTION	AMOUNT	1099	SC	CR