

Human Resource Services - Payroll 1265 Military Trail, Room BV526C/D Toronto, Ontario, M1C 1A4 payroll.utsc@utoronto.ca

HONORARIUM PAYMENT FORM

This form	should be su	ubmitted to Humar reverse. T	n Resource Se This is an auth						ly Payr	roll Sched	lule on	
□ Mr.	Mr. □ Ms. □ Mrs.		☐ Miss.	;.	□ Dr.	□ Prof.			☐ Mis	c.	□ Mx.	
First & Middle Name (Name on SIN Card) Known As (Opt				otional)	nal) Last Name (Name on SIN Card)							
SIN	SIN Student No.				Personnel No.							
Street No	Street No. and Name			No. City/Town			Province		.ce	Postal Code		
Telephon	Telephone Email Address				Date of Birth (DD/MM/YYYY)				Gender		ale 🗆 🕽	
If you a	ıre a Canadia	an Citizen, Perman above. The T4							your S	IN in the s	space	
☐ Canadian Citizen ☐ Permanent Resident				:					Non-Resident/Non-Citizen (15% tax withheld) – Do not require Small Traders Certificate Form			
Verification of SIN Card (if applicable):					☐ Verified/Checked			□ Initi				
	Work Pork Pork Porking	ble):	= / tetachica			☐ On File ☐ N/A						
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Honorarium Amount (Canadian Dollars, CDN \$)												
Date of	the Event											
Purpose	of the Ever											
Special Instructions												
CC		CFC		Ord	der No.			Fu	nd No.			
Chair's or Manager's Name (Please Print)					Telephone No.							
Chair's or Manager's Signature				Dat	Date							
Forms Prepared By				De	Department							

- Please forward completed forms and all attachments to Human Resource Services (BV526C/D)
- Incomplete forms/incorrect information will delay processing.
- For enquiries or questions please email Payroll Services at payroll.utsc@utoronto.ca