

# Payment to Individual Report

UWSA

Business Unit:

Amount	Account	Fund	Org.	Prog.	Sub-class	Budget Year	Project	SS#, Taxpayer ID#, ITIN	Name(Last)	(First)	(Initial)			
		133	066400	5			AAB3863							
		<b>Total</b>	Requisition Number:											
<b>Business Office Use Only</b>														
Withheld (cr.)									<p style="text-align: center;"><b>Entertainer or Public Speaker Section</b></p> <p><input type="checkbox"/> Yes    <input checked="" type="checkbox"/> No    Is individual an entertainer or public speaker?</p> <p><input type="checkbox"/> Yes    <input type="checkbox"/> No    Is the entertainer or public speaker a Wisconsin Resident?</p> <p>Attach form WT-11 if provided by entertainer or public speaker</p> <p style="text-align: center;"><b>Federal Tax Calculation (Business Office Use Only)</b></p> <p>Country Code: _____</p> <p><input type="checkbox"/> Exempt    <input type="checkbox"/> Non-Exempt    Withholding Rate: _____</p> <p><b>Reason For Exemption:</b></p> <p><input type="checkbox"/> U.S. Resident with SS#    <input type="checkbox"/> Non-U.S. Source</p> <p><input type="checkbox"/> Form 1001    <input type="checkbox"/> Form 4224    <input type="checkbox"/> Form 8233</p> <p><input type="checkbox"/> Other (Explain in area below)</p> <p style="text-align: center;"><b>Scholarship/Fellowship Section</b></p> <p>Semester 1 Amount _____ Semester 2 Amount _____</p> <p>Summer Amount _____ Award Date _____</p> <p>Classification/Year _____</p> <p>Dept. Chairperson / Project Director _____ Date _____</p> <p>Dean / Director _____ Date _____</p> <p>Student Financial Aids (Activity 9 Only) _____ Date _____</p> <p>Authorized Insitutional Approval _____ Date _____</p>					
Ent. Tax	Wisconsin Department of Revenue													
Net Amount														
Mail to: Building/Street City/State/Zip														
Permanent Home Address (Required if different)														
If UW or State employe indicate department														
Currently enrolled UW student		<input type="checkbox"/> Yes <input type="checkbox"/> No												
Residency:		<input type="checkbox"/> U.S. Resident <input type="checkbox"/> Legal Resident of:												
		Visa status if not US resident:												
Date(s) of Service		Purpose of Payment (For Account 2162, itemize expenses and provide receipts.)												
July 17 to July 28, 2017		Workshop or comparison teacher for gram (A^3-Assess, Analyze, and Address)												
For more information, call:		Ext.												