



# Payment Acknowledgement Form

Research Study Participant     Prizes & Giveaways     Other Membership Dues + Training Fees

Including: cash, checks, gift cards, virtual gift cards, bills paid on behalf of recipient, items above a certain dollar threshold

Legal Name (printed):

Mailing Address:

Street or PO Box:

City, State, Zip:


Are you a US Citizen or a Permanent Resident Alien?

Yes

No

If No, regardless of dollar amount, you must attach supporting immigration and tax documentation, and W-8Ben.

Payment Amount (or Value):

\$ \$95/mth \* \_\_ months (≤10) + \$95/train \* \_\_ trainings (≤2)

Is payment > \$100, or total payment(s) > or = \$600 this calendar year?\*

\* If yes, provide Social Security #:

Description of Payment/ Prize:

UVM paid upto 10 months of membership dues & upto 2 tool trainings on behalf of the student as noted above

Payment Method: (\$, gift card, check)

Payments made monthly direct to Generator

\*Provide SSN ONLY if payment is \$100 or more or if total payments from UVM are expected to exceed \$600 in a calendar year.

### RECIPIENT CERTIFICATION

I certify that the information provided above is true and accurate. If the amount of this payment is at least \$100, or if total payment(s) from UVM this calendar year shall equal or exceed \$600, I have provided my SSN.

\_\_\_\_\_  
Recipient's Signature

\_\_\_\_\_  
Date

### Responsible Office / Research PI or Designee Only

On behalf of the unit issuing the payment, I certify that I have explained this form and reporting requirements to the Recipient. Further, I understand that a non-check payment to a Recipient who is a Nonresident Alien for US income tax purposes shall be grossed-up, and requisite tax withholding expensed via Journal Entry to the chartstring to be provided by the issuing unit.

Shall Recipient's remuneration be > or = \$600 this calendar year?    \_\_\_ Yes    \_\_\_ No

\_\_\_\_\_  
Research PI or Designee's Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Attach to Petty Cash Form \_\_\_\_, Check Request Form \_\_\_\_, or PurCard Journal \_\_\_\_, as applicable.

Send via file transfer to: [genacct@uvm.edu](mailto:genacct@uvm.edu) with Petty Cash; to: [supplier@uvm.edu](mailto:supplier@uvm.edu) with Check Request;

To: [purcard.audit@uvm.edu](mailto:purcard.audit@uvm.edu) with PurCard Journals

DISBURSEMENT CENTER - 205 Waterman, 85 S. Prospect St, Burlington, VT 05405

GENERAL ACCOUNTING - 333 Waterman, 85 S. Prospect St, Burlington, VT 05405