



Accounts Payable Studebaker

To:

Please include this form with all honoraria requests.

615 West 131 st Street, 3 rd Floor New York, NY 10027
Foday's Date:
Honorarium Recipient's Name:
This honorarium is for:
\Box Participating as a juror or critic for student projects (provide date, course name, number, and professor's name below)
Date of Jury:
Course Name:
Course #:
Name of Professor:
☐ Giving a class lecture (provide date, course name, number, and professor's name below) Date of Lecture:
Course Name:
Course #:
Name of Professor:
☐ Speaking at a GSAPP Event (provide date, name of event, and attach flyer)
Date of Event:
Name of Event:
Please pay this honorarium in the amount of \$