



Honorarium Form

Date: _____

_____ has agreed to pay _____

Club Name

Vendor

an honorarium of \$ _____ for the following services:

Amount not to exceed \$400

| Services Performed | Service Date(s) |
|--------------------|-----------------|
| | |
| | |
| | |

Payee Information: Vendor Rowan University - Employee Student

Name: _____

Date: _____

Signature: _____

Banner ID#: _____

Club Information

Name: _____

Date: _____

Signature: _____

Position: _____