

**TEXAS A&M RESEARCH FOUNDATION
INDEPENDENT CONTRACTOR INVOICE**

Date: _____ TAMRF Account No.: _____

Name: _____ U.S. Social Security No.: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____ Country: _____

Email Address: _____ Daytime Telephone No.: _____

UIN (Texas A&M University System Students and Employees Only): _____

Dates of Services Performed (Month/Day/Year): _____

Description and Location of Services: _____

Description of Payment Rate: _____ Total Amount of Payment Due: _____

I certify that the work was performed on my own time as an independent contractor and not as an employee of the Texas A&M Research Foundation. I do not receive salary or wage support from The Texas A&M University System, and System resources were not used for this work.

Check One:

Signature

I am am not* a U.S. citizen, U.S. national, lawful permanent resident, or lawful temporary resident.

APPROVAL:

I certify that these costs were incurred to meet the research objectives for the referenced account and are properly chargeable to this account.

Principal Investigator's Signature

Date

FOR TAMRF USE ONLY:

TAMRF Project Administrator's Signature

Date

Expense Code: 5550

1099 Form Required

Independent Contractor Status Approved

W-9 Form Received (U.S. citizen, U.S. national, lawful permanent resident, or lawful temporary resident only)

*W-8BEN Form Received (Required if the individual is not a U.S. citizen, U.S. national, lawful permanent resident, or lawful temporary resident and is performing the work outside the United States.

Non-U.S. Citizen = Yes:

OR

*Access to Glacier required. Send individual's name and email address to: Glacier@rf-mail.tamu.edu

Reviewed by TAMRF Glacier contact.

*The individual is not a U.S. citizen, U.S. national, lawful permanent resident, or lawful temporary resident and is performing the work in the United States. See Independent Contractor Status form for additional documentation required for payment.