

## E-Reimbursement Non-Employee Profile Set-up Form

**Please use this form to request an e-Reimbursement profile for an individual who:**

- Has never had a UW – Madison appointment; OR
- Is not a newly hired UW – Madison employee; OR
- Is a former UW – Madison employee whose appointment ended more than one year ago; OR
- Is a former UW – Madison employee prior to 10/01/2008 who now has an appointment at another UW – System campus.

**Note:** Use this form only for non tax-reportable reimbursements. Use the Payment to Individual (PIR) form for tax-reportable expenditures (e.g., honorariums, fees for service, etc.). See [Tax Reportable Payments](#).

| Non-Employee Information  |                                |   |                  |                  |
|---|--------------------------------|---|------------------|------------------|
| <b>Note:</b> All non-employee address information is required. Forms with missing or incomplete information will be returned. Use only a full, legal name. Nicknames or aliases are not allowed. All payments to non-employees will be made by check. |                                |   |                  |                  |
| Last Name:  |                                |   |                  |                  |
| First Name:   |                                |   | Middle Initial:  |                  |
| Address Line 1:   |                                |   |                  |                  |
| Address Line 2 (Indicate if N/A):   |                                |   |                  |                  |
| City:   |                                |   | Zip/Postal Code: |                  |
| State and/or Province:  |                                |   | Country:         |                  |
| <b>Default Funding</b>  | Dept ID: 484260                | Fund: 144   | Program: 4       | Project: AAB6447 |
| Date of First Travel Expense (e.g., date of airfare purchase):  |                                |   |                  |                  |
| Is this non-employee a U.S. Resident for Tax Purposes?  | <input type="checkbox"/> Yes → | If yes, please supply the non-employee's U.S. Taxpayer Identification Number [SSN, ITIN, or EIN][last four digits]:             |                  |                  |
|   | <input type="checkbox"/> No →  | If no, please complete the reverse side of this form [Additional Information Required for Profiles of Nonresident Aliens(NRA)]. |                  |                  |

| Alternate Information   |                   |                   |                        |
|---|-------------------|-------------------|------------------------|
| <b>Note:</b> An alternate is a UW – Madison employee who is delegated to prepare and submit expense reports on behalf of the above non-employee. Only one alternate is required, but more may be added. All fields are required per alternate listed. |                   |                   |                        |
| <b>Last Name</b>  | <b>First Name</b> | <b>UW Empl ID</b> | <b>E-mail Address</b>  |
| Connelly  | Dana              | 00091534          | dana.connelly@wisc.edu |
| Snell   | Robin             | 00254247          | robin.snell@wisc.edu   |
|   |                   |                   |                        |
|   |                   |                   |                        |
| <b>Comments</b>   |                   |                   |                        |
| <b>Please return this form to:</b> IRP Events Coordinator, dana.connelly@wisc.edu   |                   |                   |                        |