These instructions are for the fillable form. It assumes that the individual is eligible for payment through a PIR. *Please refer to the Business Services Paying People Qualtrics Survey to walk through the appropriate questions.* These instructions will take you through the form sections.

1. Individual information: The Social Security Number, EIN or ITIN and the individual's name

Social Security Number	Last name	First Name	МІ

2. You are required to attest that the individual is eligible to be paid through a PIR. The best way to ensure you are using the correct payment method is through the Paying People Qualtrics survey. After completing the survey, if you think you have an exception, you must contact Business Services. If you are approved for an exception, check OTHER and write a brief description about the exception. Provide all back up documentation.

U						
There are strict guidelines regarding payments to individuals. Refer to the Business Services Website for clarification of those rules. The assumption is that any individual is an employee unless they qualify for an exemption.						
I attest that t	l attest that the individual is eligible for a Payment to Individual Report (PIR) payment because:					
I comp	I completed the Paying People Survey and was directed to use a PIR. (Please attach survey results)					
	There are RARE circumstances where you may have an exception to the Payment for Services rules. If you have an exception, please note it here and provide documentation.					
Other						

3. Amount and Funding: Fill out the necessary information. The amount will automatically add decimal places if you do not. If you type in \$234.50, then that Dollar amount will be in the Total field. If you type in 1000, the total field will be \$1,000.00 not \$10.00.

If you have an invoice from the individual or a contract for services, you will include it in your back up documentation. Ensure that your Funding information is correct. This is used to charge your department. The Total will auto-populate from the amount you enter.

Amount	Account	Fund	Dept Id	Prog.	Project	Sub-Class	Budget Year
	TOTAL						

4. Addresses: The check will be mailed from Business Services. Please ensure you have the correct mailing address. If the mailing address and the permanent address are the same, you can leave the Permanent Address area blank. <u>The Permanent Mailing Address is where the end of year tax documents will be mailed¹</u>. If there is no Permanent Address, the Mailing address will be used. If the address is international, please fill in the blanks as closely as you can.

¹ This is a change in process.

Mail Check to:					
Street Address City State/Country Zip					
Permanent Address if different: If both addresses are filled out End of Year 1099 will be sent to this address					
Street Address City State/Country Zip					

5. In certain circumstances for a limited time², you may be able to request the check be returned to the department. If you are requesting the check be returned to you, you MUST complete this section. Please send the check to: type in the fillable field or legibly print on a hardcopy the NAME |Department (or mailstop) and | Phone Extension. Note that this person is responsible for the check.

The signature line is for the person taking responsibility for the check. This must be signed before the form is submitted.

The only part of the form that will be filled out AFTER the PIR is submitted is the distribution line. This is for your records and for AUDIT purposes. Fill in how the check was distributed and the date. Refer to the University retention schedule to determine how long you will need to keep this document on file if you are also a check custodian.

Campus Check Delivery Please send the che	eck to:	NAME	DEPT/OFC	EXT			
As the check custodian, I understand that I am responsible for the safe keeping of this check until it is distributed. I will keep the check in a secured area and only distribute to the payee.							
Signature Distribution: Date Method							

6. Residency: If the individual is a US resident, you only need to check the US Resident Yes box.

US Resident	Yes	No If no, Legal Resident of:	Visa st	atus

If the individual is non-US resident, then choose US Resident <u>No</u>. You must state the Legal Resident country and the Visa status.

Legal Resident of is their **Country of Residence.** This may not be the same as the country that issued the passport. Please ensure that the individual tells you this information - do not assume.

7. Dates of Service: Please enter the exact dates during which the service was/will be provided. Description of Work: Describe the purpose of payment. If Business Services has questions about the work, a staff member will reach out to the Preparer of the form unless there is an alternate contact listed in this area.

Dates of Service	Description of work	ĺ

² This creates audit issues for our campus. Business Services is working on this process and it may change in the future.

8. Signatures: All of these must be signed by the appropriate UW Parkside

Т	he preparer should print	employees for the PIR to be proces	The Department Chair or		
	and sign. The name must be legible so that we will be able	Preparer: Print name and Sign on this line	Date: Ext:	Project Director must be	
				authorized to sign for	
	o contact the preparer with	Signature		charges against the	
	ny questions.			funding string used in	
		Dept. Chairperson/Project Director	Date	section 3. Please note: if	
г		Oliver shares		the individual in this	
	The Dean or Director	Signature		line is NOT an	
must approve.	must approve.	Dean/Director	Date	authorized signatory or delegate the PIR will be	
	uthorized Institutional	Business Services Signature		returned for appropriate signature.	
••	val is the appropriate	Authorized Institutional Approval	Date		
	ess Services staff per. Please leave blank.				

9. Business Services Area: Supplier #, Remit To #, and Voucher Stamp area: Leave Blank. This is for our business process.



10. Submit the completed and signed PIR form with all back up documentation.