			zabeth City pend Paym			-		
Part One To be completed by the stipend recipient								
Name								
SSN								
Is recipier	nt a US Cit	tizen, resio	lent alien			٦		-
or perman	nent reside	ent?	Y	Yes		No		
Mailing Ac	ddress							
	Street 1							
	Street 2							
	City				State		Zip	
Date(s) sti			d <u>PIM</u>	IERS				
Stipend a		\$100.00	nd novmonte a		ioot to IP	S rogulati	one and wi	
i ui	nderstand	-	nd payments a orted to the IR		-	-	ons and w	
		ieh		5 as la		Jine.		
Signature		Stipe	nd Recipient			Date _		
Part Two	To bo oon		·	fficial	ortifuin one	l outborizir	anovmont	
Approved payment amount			the university official certifyin and authorizing payment. \$100.00					
Account nu			φ100.00					
Departmer		-						
			This payment is for financial support that dos not involve services					
			rendered to EC		·			
			Sigi	nature l	below indic	ates availa	ability of fur	nds.
Signature Budget Au			thority Date					
Title								
Distribution:	:	Original	Directory of Accounting (attach check request)					
		Сору	Departmental file	es				