



## Honoraria Request Memo

Part 1) Instructions

Part 2) Sample Completed Form

**Budget Officer (optional)**

*Departmental Budget Officer is an optional field. However, it is required by some schools. Please check with your school's admin.*



**School: Name of School\* (\*required field)** *The name of the school and the department are required fields.*  
**Department: Name of Department\***

**MEMORANDUM**

To: Ms. Lucy Manyara/Ms. Shamon Shine-Lee, Budget Officer  
Office of Research Administration

From: **Principal Investigator's Full Name\*** *Principal Investigator's Information here, including full name and title*  
**Principal Investigator's Title\***

Date: **03/25/2024** *Submission Date*

Re: Honoraria Payments for the Award titled –  
**Name of the Award\*** *Name of the Award as it appears in Banner*

For Month: **Next Month\*** of Semester: **Spring** of Year: **2024**  
*Month must be 30 days past day of submission* *Semester of the request* *Calendar year of the request*

The recipient(s) listed below have been awarded an honorarium through the award titled:

**Name of the Award\***

Please disburse funds to the recipient(s) listed below with the amount indicated for the respective month.

Please charge

Grant: Index: **INDEX\*** Fund: **FUND\*** Org: **ORG\*** Program: **PROG\***  
*Enter the INDEX, FUND, ORG, and PROGRAM CODE correctly.*  
Account Code: 02010

If you have any questions please contact, **Contact's Full Name\*** *Contact/Requestor must be someone who can answer questions about this form*  
at **Phone #\*** **ContactEmail@morgan.edu**

Thank you in advance for your assistance.

**Name of School\* (\*required field)**

**Full Address of School\*** *The School's information goes here, including the name, address, and phone number.*

**Phone # of School\***

Candidate	MSU ID* & Social Security #	Address City, State, Zip	AMOUNT	Check issue date	Accounts Payable USE ONLY
Candidate's Full Name	MSU ID # 123-12-1234	Candidate's Address*, as is in Banner	\$ 0	04/25/2024	The check issue date must be at least 30 days out from today's date
<p>Please list each candidate for honorarium correctly. If they have an MSU ID #, please list it. A Social Security Number is a requirement. Their address much match what is available in Banner, if appropriate.</p>			\$		
			\$		
			\$		
			\$		
<p>In Process</p>			\$		
			\$		
			\$		
			\$		
			\$		
			\$		

*\*optional*



Budget Officer (optional)

# Part 2



**School: School of Computer, Mathematical, and Natural Sciences**  
**Department: Climate Science**

## MEMORANDUM

To: Ms. Lucy Manyara/Ms. Shamon Shine-Lee, Budget Officer  
Office of Research Administration

From: Dr. Martha Lee  
Associate Professor

Date: 03/28/2024

Re: Honoraria Payments for the Award titled –  
EiR: Fabulousness Award

For Month: April of Semester: Spring of Year: 2024

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The recipient(s) listed below have been awarded an honorarium through the award titled:

EiR: Fabulousness Award

Please disburse funds to the recipient(s) listed below with the amount indicated for the respective month.

Please charge

Grant: Index: 999999 Fund: 99999 Org: A1111 Program: 00

Account Code: 02010

If you have any questions please contact, Rebecca Steiner  
at 443-884-4044 rebecca.steiner@morgan.edu

Thank you in advance for your assistance.

**School of Computer, Mathematical, and Natural Sciences**  
**1700 E Cold Spring Lane**  
**Baltimore, MD 21251**

**443-885-3447**

Candidate	MSU ID* & Social Security #	Address City, State, Zip	AMOUNT	Check issue date	Accounts Payable USE ONLY
Joseph Song	123-12-1234	123 Main Street Baltimore, MD 21001	\$ 50.00	04/28/2024	
Sara Smith	123-12-1234	987 Elm Street Pikesville, MD 21208	\$ 137.00	04/28/2024	
Albert Einstein	00000000 123-12-1234	100 Park Ave Bethesda, MD 20810	\$ 250.00	04/28/2024	
			\$		
			\$		
		<b>In Process</b>	\$		
			\$		
			\$		
			\$		
			\$		
			\$		

\*optional

