



UNIVERSITY OF ILLINOIS SYSTEM

Disbursement to External Owner from a 9D Custodial Fund

Information of the External Owner of the Custodial Fund:

Name of External Owner: _____

Banner Vendor ID Number: _____

Name of Banner Vendor: _____

Is the payee is a foreign national nonresident alien? Yes No

If yes, make sure to review the [Payment to Foreign Nationals](#) website prior to performing services or acquiring goods.

Remittance Address: _____

City: _____ State: _____ Zip Code: _____

Amount and Description of Disbursement:

Amount: _____

Reason for Disbursement: _____

C-FOAP to be Charged for Expenditure:

Chart: _____

Fund Code: _____ Fund Title: _____

Org Code: _____ Org Title: _____

Account Code: _____ Account Title: _____

Program Code: _____ Program Title: _____

Attestation Statement of the External Owner (or Authorized Representative) of the Custodial Fund:

I represent that I am either the Owner of the Custodial Fund identified above ("Fund") or the Owner's authorized representative. By signing this Request to Return Custodial Funds to Owner form, I direct that the University disburse the amount indicated above to the Payee identified. I further represent that the Payee is not a nonresident alien and is authorized to receive the amount requested.

I acknowledge and agree that, following the return of these funds, the Owner assumes responsibility of all reporting and withholding requirements related to their subsequent use, including but not limited to filing IRS forms 1042-S (foreign national nonresident alien payments) and 1099.

Owner agrees to hold The Board of Trustees of the University of Illinois and its trustees, employees, and agents harmless from and to indemnify each of them against all claims, demands, losses and liabilities relating to University's management of the Fund in accordance with Owners' instructions.

Name: _____

Title: _____

Date: _____

By selecting "Yes" in the radio dial below and entering my name above, I attest that I have read, understand, and agree with the Owner's Attestation above in its entirety, and have complied with any necessary University foreign national processes.

Yes

University Unit Serving as Custodian for the External Owner:

Unit Name: _____ Chart: _____ Org Code: _____

Attestation Statement of the University Unit Serving as Custodian for the External Owner:

I have reviewed this Request to Return Custodial Funds to Owner form and verify that to the best of my knowledge the request is appropriate and the disbursement will not create a deficit within this custodial fund.

If the payee is a nonresident alien, I have obtained and submitted all required visa and related documentation to the Office of University Payroll and Benefits and they have granted permission to issue this payment.

Name: _____

Title: _____

Date: _____

By selecting "Yes" in the radio dial below and entering my name above, I attest that I have read, understand, and agree with the Owner's Attestation above in its entirety, and have complied with any necessary University foreign national processes.

Yes