



222 Administration Building • Fayetteville Arkansas 72701 • (479) 575-4851 • (479) 575-6971 (FAX)

Nonresident Payment Request for Travel ONLY

Date(s) of Travel: _____ University Department: _____

Name of Payee: _____ NRA Home Country _____
First MI. Last

Address of Payee: _____

_____-_____-_____
NRA Tax Coordinator will assign temporary number to Nonresident without a SSN or ITIN #

University of Arkansas ID if applicable: _____

Email of Payee: _____

Is Payee Student ___ Faculty ___ Visitor ___

Reason for Travel (Must be completed!) Let us know the TA number once you get it so we can document on this form

Person initiating this form:

Name: _____
First Last

Phone Number: _____

E-Mail Address: _____

Approver Signature: _____ DATE: _____

NRA Tax Coordinator Signature: _____

NRA Tax Coordinator USE ONLY

Travel TA# _____

PO#: _____

Date Processed: _____

Please fax or email this completed form to the NRA Tax Coordinator at
(Fax) 479-575-6971 or (E-Mail) sgahagan@uark.edu