



Lifelong Learning Institute Honorary Outside Speaker/Guest Presenter Invoice

Presenter will deliver the following agreed upon services during the event described below:

Name/Title of Event:

Date and Time of Event:

Location:

Topic/Title of Presentation:

Remit Payment (must match W9 Information) to:

Name:

Address:

Email:

Phone Number:

X _____
Lifelong Learning Institute Speaker/Presenter

LLI Authorization:

Payment Request Amount \$

Outside Speaker \$150 – Guest Presenter \$300

Approval By (authorized signature and printed name)
Title of Lifelong Learning Institute Representative
Date

Please forward this form to WCC-LLI liaison Jessica Guglielmi for processing at
jguglielmi@waubonsee.edu