

CERTIFICATE OF SELF EMPLOYMENT

Please type information in text boxes, print and sign form.
Fax (660-543-8329) or mail the completed form to:

**UCM Accounts Payable
Administration Building, 316
Warrensburg, MO 64093**

I, the undersigned, hereby declare that I will provide/ have provided services to University of Central Missouri as an independent contractor. I also certify that I do/ will file income taxes as a self employed person on Schedule C IRS Form 1040, of my personal tax return; and I am liable for any and all taxes as required by law including FICA and MEDI.

Name of individual under which taxes are filed

Address:

Street

City

State

Zip Code

Social Security number under which taxes are filed

Signature

Date