East Tennessee State University Cash Payment Acknowledgement of Receipt

Date:	
Protocol Number:	
I acknowledge cash received in payment for p	articipation in a research study by signing below:
Recipient name or Participant ID number:	
Cash Amount Received:	
Purpose of Payment:	
Signature of Participant:	
	e State University ee Use Only
Cash Amount Disbursed	
Purpose of Payment	
Index Number to be charged:	
Printed Name of Custodian/Principal Investigator:	
Signature of Custodian/Principal Investigator:	