RADFORD UNIVERSITY PETTY CASH DISBURSEMENT LOG

Research Participant Payments

The Fund Custodian is responsible for ensuring the validity of research participant information. The information below must be completed for every research subject participant disbursement. Study Title: _____ Department: IRB Reference Number: Page # of Fund: _____ Org: ____ Acct: _714180 Date of Disbursement Recipient(s) ID/Code Number * or \$ Amount Signature of Recipient (if applicable) Individual First/Last Name Page Total \$ Amount *If the study is confidential, enter recipient's ID or code number. Researcher must maintain a separate key with ID or code numbers and participant names; this key is not to be sent in with the log, but securely maintained by the researcher. For non-confidential studies enter individual's name. NOTE: **Research participant incentive payments are made to compensate individuals for participation in research studies. Radford University may have reporting responsibilities per IRS regulations in connection with these payments. If you anticipate that an individual participating in your study (ies) will receive \$600 or more during a calendar year, please contact the Controller's Office (x5760) for further guidance before your study begins. For petty cash, this form must be submitted to Accounts Payable, Email: acctspayable@radford.edu I hereby certify that the funds I received were distributed as outlined above and in compliance with the approved research study, University Funds Handling Policy and Procedures, and University Petty Cash/Change Funds Procedures. Fund Custodian Printed Name Signature Date