Research Participant Cash Payment Form
Cash compensation includes cash, gift cards, and stored value cards.

Research Study Title: ____________________________________________

Department Name if the study is of a sensitive nature.

Date of Study Participation: ____________________________________________

Amount Due: $_________

Authorizing Personnel: ____________________________________________

Research Coordinator Printed Name

Research Coordinator Signature

Participant Name: ____________________________________________

Payment Date: ____________________________________________

Amount Received: $_________

Is the Participant a Northwestern University employee? YES____ NO _____

Participant Signature: ____________________________________________________________________________________________

I certify to the following:
• The participant information is accurate.
• I have participated in the above study.
• The amount I will or have received in this study plus my participation in other Northwestern University studies (if applicable) does not exceed $100 (not including travel reimbursements) for this calendar year.

Complete the Following Section for Petty Cash Transactions

PETTY CASH – PAY OUT FORM

Date: _______ Ext. No. _______

Explanation of Items

<table>
<thead>
<tr>
<th>FUND</th>
<th>DEPT ID</th>
<th>PROJECT ID</th>
<th>ACTIVITY</th>
<th>ACCOUNT</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
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<tr>
<td></td>
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<td></td>
<td>78666</td>
<td></td>
</tr>
</tbody>
</table>

CERTIFICATION

I certify that this accounting is correct and that I have paid the amounts listed above.

NU Employee / Authorized Personnel

APPROVAL

I certify that these expenses were incurred for University-related activities and approve them as proper charges to University accounts.

Dean or Supervisor