Texas State University IRB #/Grant

Department

## Acknowledgement of Receipt of Cash or Cash Equivalent

By signing this form I am acknowledging that I received cash or a gift card in the value \_\_\_\_\_\_ -\_\_\_\_ from \_\_\_\_\_\_ as compensation for participation in research.

By signing this form and accepting this compensation, I verify that I am a U.S. Citizen or Permanent Resident

I also understand and acknowledge that should I receive a total of \$600 per calendar year in incentive pay for participating in other research projects offered through Texas State it will be reported to the Internal Revenue Service and a 1099 form will be issued. In the event that I meet the monetary threshold mentioned above, my mailing address is:

Mailing Address		
City	State	Zip
Printed Name		Last 4 digits of SSN
Signature		Date
As a representative of this study, I am acknowledging that I distributed to the above named participant.		\$
Signature of Investigator		Date
Principal Investigator		Date
*A unique number identifier will be	e accepted if no social security number is available.	

Revised 2 05 2021