

**University of Pennsylvania  
C-2 Human Subject Voucher**

- This subject will receive \$600 or more this calendar year.  
 Payment will be issued by check.  
 This study does not have an IRB waiver of HIPAA.

Fund # \_\_\_\_\_  
 IRB Protocol # \_\_\_\_\_

**To be completed if any of the boxes above have been checked:**

Subject's Last Name \_\_\_\_\_  
 Subject's First Name \_\_\_\_\_  
 Last 4 digits of SS# \_\_\_\_\_  
 Check if subject is an employee of UPHS, CPUP, UPenn

**Please check one:**

**For U.S. Citizens or Resident Aliens**

- Current calendar year W-9 attached  
 W-9 previously submitted  
 No W-9 required – calendar year payment is less than \$600

**For Non Resident Aliens**

- Attach Visa, Passport, I94 Card, Valid ITIN or SSN

Description of Visit (use descriptive type: e.g., visit 3 of 6, 6 month follow-up):  
 \_\_\_\_\_

Dollar amount of Remuneration \$ \_\_\_\_\_ 5316 (Human Subject Payments)  
 Dollar amount of out-of-pocket expenses – list types separately and attach receipts:  
 Travel/Meals (specify) \_\_\_\_\_ \$ \_\_\_\_\_ 5206 (Non-Employee Travel)  
 Travel/Meals (specify) \_\_\_\_\_ \$ \_\_\_\_\_ 5206 (Non-Employee Travel)  
 Other \_\_\_\_\_ \$ \_\_\_\_\_ 5241 (Patient Care Supplies)  
 Grand Total \$ \_\_\_\_\_

CRC Name (please print) \_\_\_\_\_

CRC Signature \_\_\_\_\_ Date \_\_\_\_\_

This signature certifies the human subject listed above is eligible for payment having fulfilled all requirements outlined in the approved protocol.

Check one box:

- Subject received **cash** totaling \$ \_\_\_\_\_  
 No payment received, check to be processed  
 Subject received \$ \_\_\_\_\_ in the form of a  gift card  money order  other Greenphire ClinCard

Subject Signature \_\_\_\_\_ Date \_\_\_\_\_

If no signature is obtained, an explanation is required.

<u>Business office use only:</u>							
Advance reference # _____							
<u>26-Digit Account Number</u>							
CNAC	ORG	BC	FUND	OBJECT	PROG	CREF	\$ Amount
_____	_____	_____	_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	5206	_____	_____	\$ _____
_____	_____	_____	_____	5241	_____	_____	\$ _____