|  |
| --- |
| **Study Title:**  |
| **IRB#:** | **Principal Investigator:** |
| **Study Site:** | **Sponsor:** |
|

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Participant ID** | **Visit Date** | **Payment Amount** | **Payment Type** | **Payer Signature**  |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |

*Note: This log serves as documentation of compensation to participants according to the IRB-approved informed consent. Please keep a receipt of each payment with the participant’s signature. Changes to payment type/amount require IRB approval.*  |