

## PAYMENT REQUEST FOR STUDY PARTICIPANTS (Subsequent Request)

DATE:

TO: BRINM

**REQUESTED BY:** 

BRINM Project #:

Requested Amount: \$

Participant:

A consent form for this participant is on file for participation in HRRC#:

Study Coordinator:

It is understood that VA employees <u>are prohibited</u> from participating for pay as human research participants in any VA approved research project conducted <u>on duty</u> per Albuquerque VAMC Professional Services Memorandum #151-5, dated March 29, 2005, participant: Obtaining Informed Consent for Human Participation in VA Approved Research Projects, paragraph 3b. VA employees may participate for pay after duty hours only.

Investigator Signature

**BRINM** Account

Transferred to Card on \_\_\_\_\_

**BRINM** Authorization