Oakland University Research Participant Receipt Form (RPRF)

Required for individual participant payments greater than or equal to \$75 per IRB Approved Protocol

Oakland University is required to maintain the confidentiality of information about research study participants while still complying with record keeping requirements of the State of Michigan, the Internal Revenue Service (IRS), and funding agencies. This form serves to provide certification of receipt of compensation by individuals participating in research studies conducted by OU personnel and is used to comply with IRS reporting standards. All information provided on this document is protected by federal and state laws and Oakland University will not disclose any information without your consent for any other purpose except as allowed by law.

1.	l,	earch Participant Name)	have received com	pensation in the forr	n and amount ind	licated be	elow:
	(Print Rese	earch Participant Name)					
	☐ Cash	\$	_ Gift Card	\$		-	
	☐ Check	\$	_	Description:			
			Tangible Item	Value: \$	4	V	
2.	Record Social Security Number or Individual Taxpayer Identification Number:						
			OR _				
		Social Security Number		Individual Taxpayer	· Identification Numbe	er	
3.	Indicate your	tax status (select one):					
	U.S. Citizen	Resident Alien	Non-Residen	nt Alien (Must attach co	ompleted <u>W-8BEN</u>)		
4.	Please record	your complete address:					
	Address			City		State	Zip Code
5.	Have you rece	eived any other payment	s for research partic	cipation from OU in t	his calendar year	? If so, plo	ease indicate amount.
	\$						
I he	ereby certify the	at the above statements	are true and corre	ect to the best of my	knowledge. I und	lerstand t	that in the event that I
		nd willfully made any fa		= = =	=		
sta	itutes.						
		(Research	n Participant Signature)		Date	_	
TA	X REPORTING II	NFORMATION:					
For	· U.S. citizens and	resident aliens: A form 109	9-MISC will be issued	if total of ALL paymen	ts from OU equals o	or exceeds	\$600 in a calendar year.
		ens: A form 1042-S will be is					
		eting an <u>IRS Form 8233</u> . Exe on number, (2) citizenship o					
		days. Non-resident aliens n					

Research participants may be given the opportunity to participate without receiving payment if they choose not to complete this form.

If an OU check needs to be issued for payment, attach the RPRF to a completed Payment Voucher (PV) and submit to Accounts Payable.

FOR OU PRINCIPAL INVESTIGATOR:

IRB Approved Protocol Title & Number: