



Research Human Subject Disbursement Request

INSTRUCTIONS: Please read the requirement and step-by-steps instruction on how to complete the form here. The form must be signed by the Principal Investigator (PI). Cash/Gift cards will be released to the authorized personnel(s) or PI listed on this form only. Submit form to askpsc@finance.ucla.edu. Please note IRB# and total disbursement amount in email subject.

DATE SUBMITTED: [] Active IRB approval #: [] IRB Exp Date: []

DEPARTMENT NAME & CODE (please do not abbreviate): []

Table with 5 columns: AUTHORIZED PERSONNEL, UCLA EMAIL ADDRESS, PHONE, UNIVERSITY ID #, AUTH. PERSONNEL SIGNATURE. Rows 1 and 2.

DELIVERY ADDRESS (please provide building and room # if on-campus. If off-campus, include full US Postal address.) []

DISBURSEMENT TYPE: must match with active IRB approval on file with OHRPP. Total disbursement exceeding \$5,000 will take up to five (5) business days for approval. More than one disbursement type may be selected.

• BRUINCARD DEPOSIT - attach excel spreadsheet with cardholder name, valid 9-digit BruinCard ID #, and amount. Requisition number of the Online Recharge Order Request for this payment: []

• PREFERRED GIFT CARD (returnable)- See list of preferred gift cards here. Target, Amazon, Starbucks. Columns: Quantity, Value/Card, Shipping Fee, Per Card Fee, Total Cost.

• NON-PREFERRED GIFT CARD (no returns) - allow up to 4 weeks, depending on the vendor processing and delivery schedule. Card Type, Quantity, Value/Card, Total Cost.

• CASH - complete cash denomination distribution below. Exact cash denominations are not guaranteed. Table with columns: Count, Extended Total for \$1's, \$5's, \$10's, \$20's, \$50's, \$100's, and Grand Total.

General Ledger Account to charge for disbursement. Table with columns: Loc, Account (6), CC (2), Fund (5), Project (6), Sub (2), Object (4), Source(6), Total Disbursement.

General Ledger Account to recharge Dunbar service fee. Fee per delivery for on-campus and off-campus is \$10.05 and \$15.55. Table with columns: Loc, Account (6), CC (2), Fund (5), Project (6), Sub (2), Object (4), Source(6), Total Service Fee.

BY SIGNING THIS FORM, YOU ARE CONFIRMING YOUR DEPARTMENT IS IN COMPLIANCE WITH: 1. UCLA Safe Requirements. Safe Type: [] Serial # [] 2. BUS-49 (Policy for CASH and Cash Equivalent Received) AND UCLA Policy 361 (Cash Handling Safety and Security) 3. IRS requirement for collecting a W-9 and 1099 if the total disbursement per participant exceeds \$600 per calendar year

Fund Manager's Name [] Fund Manager's Signature [] Date [] Principal Investigator's Name [] Principal Investigator's Signature [] Date []