



Udbetaling af Honorar for deltagelse i forsøg / Payment for participation in experiment

Institut:	
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Cpr. Nr. (dansk) / Date of Birth (Foreign account)

CPR / Date of Birth		Contact at AAU: Name and Department	
City of Birth		Name of accountholder in the Bank	
Name		Name of Bank	
Private Address		Address of Bank	
Postal Code		Account number	
City and Country		International Bank Account Number (IBAN) (European countries)	
Country Code		Swift Code or Bank Code (SWIFT or BIC)(All countries)	
Gender M / F	Male <input type="checkbox"/> Female <input type="checkbox"/>	ABA Routing Number (USA/Canada)	

Udfyldes med blokbogstaver / Please use capital letters

Foreign citizens:			
Date of valid work permit:	Your nationality:	Your aliens no: (if not an EU citizen)	

Local Ethics Committee's Case Number (must be stated):

VN- _____

Dato / Date	Forsøgets art / type of experiment	Beløb / amount
Total		

- Det udbetalte beløb indberettes som B-indkomst. / The amount will be reported to the taxation authorities .

Dato/Date: _____

Underskrift / Signature (forsøgsperson/subject) _____

Underskrift/Signature (projektleder/project leader) _____

NAME IN BLOCK LETTERS: _____

UK								Modt. /eft. Reg.:
art	1	4	7	0	1	5		
omk. sted								
proj.nr.								
fin. kilde								Attestation
formal								
analyse								
								Anvisning

Husk dato for attestation og anvisning.