**Service Fee IDB Authorization Form**

Date

I, Click or tap here to enter text., authorize the transfer of Choose an item.(CAD)

from my University of Calgary Trust account, project Click or tap here to enter text. to the University of Calgary Research Services Office account, 10-80510 for the Conjoint Health Research Ethics Board Service Fee.

The Ethics ID number for this project is Click or tap here to enter text..

Please initiate this transfer as soon as possible.

Thank you.

Click or tap here to enter text.

Signature of account holder

Click or tap here to enter text.

Name of account holder

Click or tap here to enter text.

Phone number of account holder

**Note:** *The ethics administration fees will be subject to overhead using the IDB process*