**受试者补助费用发放登记汇总表**

**（电子版交机构）**

项目名称及编号：

专业组： 主要研究者：

|  |  |  |  |  |  |  |  |  |
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| **序号** | **银行卡号** | **姓名** | **是否农行账户**  **（是/否）** | **开户银行**  **（行别）** | **开户行支行名称** | **金额** | **访视期** | **备注** |
| 示例 | xxx | 张三 | 否 | 中国银行 | 中国银行仙桃分行营业部 | 100 | V1 |  |
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**受试者补助费用发放登记表**

**（受试者签字版专业组留存）**

项目名称及本中心编号：

专业组： 主要研究者：

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| **序号** | **登记日期** | **随机号** | **姓名** | **受试者身份证号** | **受试者银行卡号** | **银行卡开户行** | **受试者联系电话** | **访视期** | **补偿金额（元）** | **受试者**  **（签字）** | **登记人**  **（签字）** |
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