

East Tennessee State University  
Traditional Gift Card Acknowledgement of Receipt

Date: \_\_\_\_\_

Protocol Number: \_\_\_\_\_

By signing below, I acknowledge receipt of the following Gift Card:

Recipient name or Participant ID  
number: \_\_\_\_\_

Gift Card Amount: \_\_\_\_\_

Purpose of Payment: \_\_\_\_\_

Signature of Participant: \_\_\_\_\_

East Tennessee State University  
Employee Use Only

Gift Card Serial Number: \_\_\_\_\_

Purpose for Issuing Gift Card \_\_\_\_\_

Index Number to be charged: \_\_\_\_\_

Printed Name of Custodian/Principal Investigator: \_\_\_\_\_

Signature of Custodian/Principal Investigator: \_\_\_\_\_