Billing Information Form

**Industry Funded Studies Only**

Please provide the following information which HREBA / Alberta Innovates requires in order to prepare an invoice for your industry funded study. Upload the completed form in IRISS to the “REB Service(s) Fee” section.

Once the initial ethics certificate has been issued an invoice will be sent to the e-mail indicated below.

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| 1. **STUDY INFORMATION** | | | |
| HREBA Study/Ethics ID #: | | Principal Investigator: | |
| Full/Long Study Title: | | | |
| |  |  | | --- | --- | | Protocol #: | Sponsor Name: | | | | |
| Site # (if applicable):  Site Name/Address (if different from billing address below): | | | |
| 1. **BILLING INFORMATION** | | | |
| **Invoice to be made out to:** | | | |
| Organization (full legal name): | | | |
| Street Address: | | | |
| City: | Province: | | Postal Code: |
| Phone Number: | | | |
| **Invoice to be sent to:** | | | |
| Attention: | | E-mail: | |
| (If required): Attention: | | E-mail: | |

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| FOR OFFICE USE ONLY |
| Amount to be Invoice: Job Code: |