

Tango Request Form

Use this form to request prepaid cards for study subject/participant payments in Tango. Please complete the form sections in order as they appear on form and answer all fields in a section before moving on to the next.

For studies funded by a sponsored project, please submit the completed form to SponsoredPrograms@unc.edu. For studies on non-sponsored funding, please submit the completed form to tango@unc.edu.

The applicable central offices will return the signed form back to the Department contact. If the request is approved, the department will upload the approved form for campus voucher submission in ConnectCarolina. For more information see the <u>Guidance on Study Subject Payments</u>.

Doguest Information					
Request Information					
Is this Tango request for:	Sponsored Program	n (Non-Spons	sored Program Re	quest type: New Pro	ject/Act. • Existing
Please select all actions for	this request: 🔀 Add F	unds	Add/Remove Users		
Department Informa	ation				
Department ID:		621100	Principal Investigator (PI):		Jane Doe
Department Contact:		John Doe	Department Contact Email:		johndoe@unc.edu
If contact fo	r department reconcile	er is different from	department contact, please	complete the informa	tion below.
Department Reconciliation Contact:		Janette Doe	Department Reconciliation Email: -		janettedoe@unc.edu
PS Project ID:		5102345			
Chartfield String for	Advance				
Fund	Source	Account	Dept. ID	Project ID	
25210 4	9000	559550	621100	5102345	_
PC Business Unit	Activity	Amount	Cost Code 1	Cost Code 2	
CHOSR	1	100			
up and down buttons. More	e pages are automatically	generated if needed		nd minus buttons. Line o	rder is controlled by the
Quantity Amount Per Ca		er Card	Total		
* 5 \$10.00			\$50.00		
2	\$25.00		\$50.00		
Total Requ	uested:		\$100.00		
Justification and Pur	pose				
Purpose of prepaid card	ds:			Pay study pa	rticipants for study xyz.



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		ango nequest	101111	
Describe physical safeguard of undistributed cards (even non-loaded):				Locked in desk.
Other relevant information for central office review:				
TANGO Agreement				
I, the PI, Jane Doe		understand tl	nat the \$ ₁₀₀	is an advance of
University funds made to the	department to make pay	ments for purposes a	uthorized by University	policies. I understand that my
department and I are respon	sible for reconciliation of	expenses in the Unive	rsity financial system	We agree to provide appropriate
documentation for participar	nt payments distributed w	vithin a calendar mon	th by the 15th (<i>or next b</i>	business day) of the following
				perating Standard & Procedure -
500.17 - PrePaid Cards.	mousie requirements out	ea ee <u>. oee o</u>	ponsorea rrograms op	retaining standard at 1100cdare
500.17 - Frei ald Cards.				
Office of Sponsored Program	s is authorized to seek fun nternal Audit. I acknowled	nds from the departm dge that any suspecte nciled Expense	ent to replenish Univers	ons, Accounting Services and the sity funds and may report the libe sent to the Office of Internal
Fund	Source	Account	Dept. ID	act gardennes.
	16000	621100		
Program	Cost Code 1	Cost Code 2	Cost Code 3	
Signatures				
financial requests. This cor	npleted, signed and app d within 10 business do	oroved form must b	e attached to the vouc	ner is NOT needed for non- cher by the department. The d is subject to denial if funds are
Principal Jane Doe Investigator:	Departn Con	nent John Doe tact:	Dept. Fi Lead/	nance /Chair:
Signature: Jane Doe	Digitally signed by Jane Doe Date: 2023.07.27 14:58:03 Signat 	ure:John Doe	itially signed by John e te: 2023.07.27 57:05 -04'00'	parture: Janette Doe Janette Doe Date: 2023.07.27 14:56:51 -04'00'
Date:				



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Central Office Use Only						
○ Approved		thorized Central Office Signature:	RT ID:	Date:		
Notes:						