



**PHARMACOVIGILANCE AND CLINICAL TRIALS DIVISION**

JOINT DECLARATION BY SPONSOR AND PRINCIPAL INVESTIGATOR  
CONCERNING SUFFICIENT FUNDS TO COMPLETE STUDY

**Title:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Protocol:** \_\_\_\_\_

I, \_\_\_\_\_ <full name> \_\_\_\_\_ representing \_\_\_\_\_ <sponsor or representative> \_\_\_\_\_  
and I, \_\_\_\_\_ <full name> \_\_\_\_\_, Principal Investigator hereby declare that  
sufficient funds have been made available to complete the above-identified study.

\_\_\_\_\_  
Signed  
SPONSOR  
(Name)  
(Address)  
(Contact details)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signed  
PRINCIPAL INVESTIGATOR  
(Name)  
(Address)  
(Contact details)

\_\_\_\_\_  
Date