

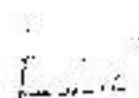
Informant Consent Form

Date: _____
 Time: _____
 Location: _____

1. I am a research participant in a study titled "The Effect of _____ on _____". I have read and understand the purpose of the study, the procedures, the risks and benefits, and the confidentiality of the information I provide. I have also read and understand the informed consent form and I have asked for and received answers to all my questions. I have signed this form voluntarily and without any coercion or undue influence.
2. I understand that my participation in this study is voluntary and that I may withdraw at any time without any penalty or loss of benefits to which I am entitled. I understand that my participation in this study may have some risks, but I believe the benefits outweigh the risks. I understand that my participation in this study may be confidential, but I understand that there may be some limitations to confidentiality. I understand that my participation in this study may be used for research purposes only and that I will not be paid for my participation. I understand that my participation in this study may be used for research purposes only and that I will not be paid for my participation. I understand that my participation in this study may be used for research purposes only and that I will not be paid for my participation.
3. I understand that my participation in this study may be confidential, but I understand that there may be some limitations to confidentiality. I understand that my participation in this study may be used for research purposes only and that I will not be paid for my participation. I understand that my participation in this study may be used for research purposes only and that I will not be paid for my participation. I understand that my participation in this study may be used for research purposes only and that I will not be paid for my participation.
4. I understand that my participation in this study may be confidential, but I understand that there may be some limitations to confidentiality. I understand that my participation in this study may be used for research purposes only and that I will not be paid for my participation. I understand that my participation in this study may be used for research purposes only and that I will not be paid for my participation. I understand that my participation in this study may be used for research purposes only and that I will not be paid for my participation.
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Sehr geehrte Damen und Herren,
hiermit bestätige ich die Teilnahme an der KPMG-Prüfung am 15. April 2019.
Sollten Sie noch weitere Informationen benötigen, bitte kontaktieren Sie mich.

15. April 2019



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