Truth in Testimony Disclosure Form

In accordance with Rule XI, clause $2(g)(5)^*$, of the Rules of the House of Representatives, witnesses are asked to disclose the following information. Please complete this form electronically by filling in the provided blanks.

Committee: Science, Space, and Technology
Subcommittee:
Hearing Date: November 20, 2019
Hearing Subject:
Fighting Flu, Saving Lives: Vaccine Science and Innovation
A-thory C Favri
Witness Name: Anthony S. Fauci
Position/Title: Director, National Institute of Allergy and Infectious Diseases
Witness Type: Governmental Non-governmental
Are you representing yourself or an organization? O Self Organization
If you are representing an organization, please list what entity or entities you are representing:
National Institute of Allergy and Infectious Diseases, National Institutes of Health
If you are a non-governmental witness, please list any federal grants, cooperative aggreements, or contracts
(including subgrants or subcontracts) related to the hearing's subject matter that you or the organization(s) you represent at this hearing received in the current calendar year and previous two
calendar years. Include the source and amount of each grant, cooperative aggreement, or contract. If
necessary, attach additional sheet(s) to provide more information.
Not any continues a payments originating with a foreign
If you are a <u>non-governmental witness</u> , please list any contracts or payments originating with a foreign government and related to the hearing's subject matter that you or the organization(s) you represent at
this hearing received in the current year and previous two calendar years. Include the amount and
country of origin of each contract or payment. If necessary, attach additional sheet(s) to provide more information.