## **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
Witness Name: Daniel B. Jernigan
Position/Title: Director, Influenza Division, National Center for Immunization and Respiratory Diseases, Centers for Disease Control and Prevention
Witness Type:   Governmental O Non-governmental
Are you representing yourself or an organization?   Self  Organization
If you are representing an organization, please list what entity or entities you are representing:
U.S. Centers for Disease Control and Prevention
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.
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.