



SIRS Financial Conflict of Interest Disclosure Statement

Name: _____

Email: _____

I certify that all my (and my immediate family's) affiliations with or financial involvement (e.g., employment, consultancies, honoraria, equity ownership or stock options, grants, contracts, patents, received or pending, or royalties) with any organization or entity having a financial interest in or a current or potential financial conflict with any matters related to SIRS are disclosed completely here. For purposes of disclosure, financial involvement is defined as any income source having occurred within the last 2 years. Please note if any income source is greater than or equal to \$10,000 per year or has the potential to generate that amount per year in the future (e.g. patents or royalties). Also, please note if the financial involvement constitutes more than 5% of one's family income.

Part One: Any Financial involvement with a pharmaceutical or biotechnology company, a company providing clinical assessment, scientific, or medical products or companies doing business with or proposing to do business with SIRS over past 2 year, or proposing to do business in the futures (Jan. 2011 – Present) should be listed here:

Part Two: List annual income sources & equity of \$10,000 per year or greater (Jan. 2011 – Present):

Part Three: Financial involvement with a pharmaceutical or biotechnology company, a company providing clinical assessment, scientific, or medical products or companies doing business with or proposing to do business with SIRS which constitutes more than 5% of family income (Jan. 2011 – Present):

Part Four: Grants from pharmaceutical or biotechnology company, a company providing clinical assessment, scientific, or medical products directly, or indirectly through a foundation, university, or any other organization (Jan. 2011 – Present):

Part Five: My primary employer is a pharmaceutical/biotech/medical device company. List company name:

_____ (Initial Here) I have no relevant financial interests to disclose.

Signature _____

Date _____