

TTUHSC FINANCIAL DISCLOSURE FORM

Send completed form to Virginia Smith, TTUHSC Lubbock STOP # 8146 or fax 806-743-4746.

Please check appropriate box. Initial disclosure Update: Annual (FY) Change in status

NAME (PRINTED): _____ Telephone: _____

Department: _____ Title: _____

Email address: _____ Campus: _____

Please check ALL that apply to you and Family Members. Refer to HSC OP 73.09 as needed

- A. \$10,000 or more in salary from a company with a financial interest in the research, either earned during the prior 12 months or to be earned in the next 12 months, that is not directly related to the reasonable costs of conducting the research (i.e. that is not compensation for % effort on a project)
- B. \$10,000 or more in the aggregate in royalties, honoraria, consulting fees, or other payments from a financially-interested company, received directly or indirectly in the prior 12 months or in the next 12 months, that is not directly related to the reasonable costs of conducting the research
- C. \$10,000 or more in value of equity or stock options, or more than 5% ownership interest, in a financially-interested company that is publicly traded
- D. Equity interests, stock options, or entitlement to the same in a financially-interested company that is not publicly traded
- E. Royalty income or the right to receive future royalties under a patent license or copyright, where ongoing research is related either directly or indirectly to the licensed technology or research
- F. Non-royalty payments or entitlements to payments from a financially-interested company that are not directly related to the reasonable costs of the research as specified by the research agreement between the sponsor and the institution. Such payments include any bonus or milestone payments to the investigators in excess of reasonable costs incurred (See also HSC OP 65.06 Contracts and Grants Made Directly to Individuals.)
- G. Service as an officer, director, or in any other fiduciary role for a financially-interested company, whether or not payment or other benefit is received for such service
- H. None of the above

If any items A-G were checked, please identify by item # and describe the source and monetary amount on a separate sheet.

Attestation:

I have reviewed TTUHSC OP 73.09, Conflict of Interest in Research and agree to comply with it. The above facts and information are an accurate and complete account of my financial relationships. I will update this Disclosure Form on an annual basis or when any new reportable financial interest/relationship is obtained by me or a Family Member. I will comply with a Conflict Management Plan designed to manage, reduce or eliminate any actual or potential financial conflict of interest before conducting the research.

Signed: _____
(Original Signature only – a “per” signature is not acceptable)

Date: _____