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COMMITTEE ON OVERSIGHT AND REFORM

SELECT SUBCOMMITTEE ON THE CORONAVIRUS CRISIS

U.S. HOUSE OF REPRESENTATIVES

WASHINGTON, D.C.

INTERVIEW OF: MARK WEBER

Friday, August 27, 2021

The Interview Commenced at 8:57 a.m.

25 Appearances.

26

27 For the SELECT SUBCOMMITTEE ON THE CORONAVIRUS CRISIS

28 [Redacted]

29

30

31 For the U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES:

32 KEVIN BARSTOW, Senior Counsel

33 JENNIFER SCHMALZ

34 JOANNE MARTINEZ

35

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93 P R O C E E D I N G S

94 [Majority Counsel]. This is a transcribed interview
95 of Mark Weber conducted by the House Select Subcommittee on
96 the Coronavirus Crisis. The interview was requested by
97 Chairman James Clyburn as part of the Committee's oversight
98 of the federal government's response to the coronavirus
99 pandemic. So I'd like to just ask the witness to state his
100 full name and spell his last name, please, for the record.

101 The Witness. Sure. My name is Mark Alan Weber, and
102 the last name is spelled W-E-B-E-R.

103 [Majority Counsel]. Great. Mr. Weber, my name is
104 [Redacted] and I am Majority counsel for the Select
105 Subcommittee, and I do want to thank you for being here
106 today and sitting for this interview. We know you're here
107 voluntarily and we really do appreciate that.

108 The Witness. Mm-hmm.

109 [Majority Counsel]. Under the Committee's rules, you
110 are allowed to have an attorney present to advise you
111 during the interview. Do you have an attorney present
112 today representing you in a personal capacity?

113 The Witness. I do not.

114 [Majority Counsel]. I understand that there are
115 attorneys accompanying you today.

116 Would any counsel please just state their names and
117 their affiliation.

118 Mr. Barstow. Sure. Kevin Barstow, senior counsel at
119 HHS.

120 [Majority Counsel]. Excellent. And then just the
121 additional staff in the room today, let's go around and
122 introduce ourselves. Maybe start with HHS staff who's here
123 and then we can go from there to the Majority.

124 Ms. Schmalz. This is Jenn Schmalz.

125 [Majority Counsel]. Great.

126 Ms. Martinez. This is Joanne Martinez.

127 [Majority Counsel]. Sorry about that.

128 Mr. Barstow. That's it on our end.

129 [Majority Counsel]. Okay. Can the last person from
130 HHS restate their name? I didn't catch that.

131 Ms. Martinez. Sorry about that. Hi. This is Joanne
132 Martinez.

133 [Majority Counsel]. Great. Thanks, Joanne.

134 Majority staff besides myself?

135 [Majority Counsel]. Hey, there. [Redacted] for the
136 Majority.

137 [Majority Counsel]. Hi. [Redacted] for the
138 Majority.

139 [Majority Counsel]. And [Redacted] for the Majority.

140 [Majority Counsel]. And then the Minority staff?

141 [Minority Counsel]. [Redacted] with the Minority.

142 [Minority Counsel]. [Redacted] with the Minority.

143 [Minority Counsel]. [Redacted] with the Minority.

144 [Minority Counsel]. [Redacted] with the Minority.

145 [Majority Counsel]. Okay. Great. Great.

146 Mr. Weber, just a couple ground rules before we get
147 started here. As previously agreed to by the Majority
148 staff and the HHS staff, the scope of this interview is the
149 federal government's response to the coronavirus pandemic
150 from December 1, 2019 through January 20, 2021.

151 The interview will proceed as follows. The Majority
152 and Minority staffs will alternate asking you questions one
153 hour per side per round until each side is finished with
154 their questioning. The Majority staff will begin and
155 proceed for an hour, and the Minority staff will then have
156 an hour to ask questions. We'll alternate back and forth
157 in this manner until both sides have no further questions.

158 The time will begin at the conclusion of my
159 instructions here. We have agreed that if we are in the
160 middle of a line of questioning, we may end a few minutes
161 before or go a few minutes past the hour just to wrap up a
162 particular topic.

163 In this interview, while one member of the staff may
164 be leading questioning, additional staff may ask questions
165 from time to time. I believe you're aware of this.

166 As you've seen, there is a court reporter taking down
167 everything we say to make sure there is a written record of

168 the interview. For the record to be clear, please wait
169 until I finish asking you each question before you begin to
170 answer, and I will endeavor to wait until you finish your
171 response before asking you the next question. The court
172 reporter cannot record nonverbal answers such as shaking
173 your head, so it is important that you answer each question
174 with an audible verbal answer.

175 Do you understand this?

176 The Witness. Off mute. And yes, I do.

177 [Majority Counsel]. Excellent. And we want you to
178 answer our questions in the most complete and truthful
179 manner possible, so we are going to take our time when
180 asking you questions. If you have any questions or don't
181 understand any of the questions we ask, please let us know
182 and we'll be happy to clarify or rephrase our questions.

183 Do you understand?

184 The Witness. Will do. Understood.

185 [Majority Counsel]. If I ask you any questions about
186 conversations or events in the past and you are not able to
187 recall the exact words or details, you should speak to the
188 substance of those conversations or events to the best of
189 your recollection. And if you recall only part of a
190 conversation or event, you should give us your best
191 recollection of those events or parts of those
192 conversations that you do recall.

193 Do you understand?

194 The Witness. I understand.

195 [Majority Counsel]. Great. And if you need a break,
196 please let us know. We're happy to accommodate you.
197 Ordinarily we take roughly a five-minute break at the end
198 of each hour of questioning. But if you need a break
199 before that, again, just please let us know.

200 We do ask that to the extent there is a pending
201 question, that we do try to finish answering the question
202 before you take a break. And we will also plan to take a
203 lunch break this afternoon.

204 Do you understand?

205 The Witness. I understand.

206 [Majority Counsel]. Excellent. And although you are
207 here voluntarily and we will not be swearing you in today,
208 I do want to remind you that you are required by law to
209 answer questions from Congress truthfully. And this also
210 applies to questions posed by congressional staff in an
211 interview.

212 Do you understand?

213 The Witness. Yes, I understand.

214 [Majority Counsel]. So just to put a finer point on
215 it, if you knowingly make any false statements, you could
216 be subject to criminal prosecution.

217 You understand?

218 The Witness. Yes, I understand.

219 [Majority Counsel]. Excellent. And is there any
220 reason you are unable to provide any truthful answers in
221 today's interview?

222 The Witness. No reason.

223 [Majority Counsel]. Great. And lastly, the Select
224 Subcommittee on the Coronavirus Crisis is a subcommittee of
225 the Committee on Oversight and Reform and we follow the
226 rules of the Committee on Oversight and Reform. So please
227 note that to the extent you wish to assert any privilege
228 over any statement today, that assertion must comply with
229 the Committee's rules.

230 And I will just note for the record that Committee
231 Rule 16(c)(1) states, "For the Chair to consider assertions
232 of privilege over testimony or statements, witnesses or
233 entities must clearly state the specific privilege being
234 asserted and the reason for the assertion on or before the
235 scheduled date of testimony or appearance."

236 Do you understand?

237 The Witness. I understand.

238 [Majority Counsel]. Excellent. And do you have any
239 questions before we begin today?

240 The Witness. No, I do not.

241 [Majority Counsel]. Okay. Well, that concludes the
242 instructions section, so we will begin the first round of

243 questioning.

244 BY [MAJORITY COUNSEL].

245 Q So, Mr. Weber, I'd just like to start by
246 briefly discussing your educational and professional
247 background. I understand that you recently retired from
248 HHS after about 31 years with the agency; is that correct?

249 A That's correct. Actually a little more than
250 32 years, but -- quibbling. It was a very exciting last
251 year. Let's just put it that way. And, you know -- shall
252 I go ahead and go into some of my career background and
253 education at this point or --

254 Q Absolutely. That would be great, please. Any
255 position that you've held throughout your career at HHS,
256 please.

257 A Yeah, sure. So it's actually pretty simple.
258 In the over 32 years I worked here at HHS, I basically had
259 three jobs. I often say no two days were the same, but the
260 first job was a speechwriter for the assistant secretary
261 for health. It was about five or six years.

262 Then for about 16 years, I was the director of
263 communications for the Substance Abuse and Mental Health
264 Services Administration. And then almost -- for almost ten
265 years, the deputy assistant secretary for public affairs
266 with a primary focus on the human services portfolio.

267 My undergraduate degree at Virginia Tech was in

268 marketing. My master's degree, MBA, is in marketing, also,
269 from George Washington University.

270 Q Excellent. You mentioned you were the deputy
271 assistant secretary for public affairs. What time period
272 did you serve in that position?

273 A I started in the ASPA, Office of the Assistant
274 Secretary for Public Affairs, in January of 2012.

275 Q 2012. Okay. Great. And did you hold that
276 position until you retired last month?

277 A Yes. That's correct.

278 Q Excellent. And as the deputy assistant
279 secretary and during the period in question, so roughly
280 during 2020, did you have any direct reports?

281 A Yes. I had multiple direct reports. So in
282 terms of reporting relationships, the -- as the manager who
283 runs the HHS studio, the digital -- ASPA digital team,
284 which the team that runs the hhs.gov website, as well as
285 social media for the department. Also, an individual who
286 works with the agencies across the department on review and
287 coordination around public education campaigns, and the
288 news media team that -- they focused on the human services
289 portfolio, which would include Indian Health Service,
290 Substance Abuse and Mental Health Services Administration,
291 Administration for Community Living, Administration for
292 Children and Families, and Office of Civil Rights.

293 So -- and a couple other offices I could go through,
294 but -- if relevant, we can get into that.

295 Q Maybe we'll circle back, but that's helpful
296 context.

297 A Okay.

298 Q And did you report directly to anyone as the
299 deputy assistant secretary?

300 A Yeah, I report to the assistant secretary for
301 public affairs.

302 Q Got it. Okay. And can you describe just high
303 level the types of work that ASPA traditionally does at
304 HHS?

305 A Yeah. Actually, yes. Pretty easy. A large
306 part of what we do at ASPA is to coordinate and align
307 program policy with messaging. And so as I mentioned, I
308 was primary for the human services portfolio. So I would
309 say major announcements that would come from any of those
310 agencies I mentioned, those agencies were responsible for
311 informing ASPA about what was planned.

312 I would work to make sure that that information was
313 consistent with the current policies, that it was
314 coordinated with other agencies.

315 As an example, Indian Health Service may make an
316 announcement about substance abuse prevention. The Indian
317 Health Service was coordinated with the Substance Abuse and

318 Mental Health Services Administration and others as needed.
319 So that would be a large portion sort of of the overall
320 operations.

321 And then on the other side for me, as I mentioned,
322 ASPA runs hhs.gov. So making sure the website is
323 maintained and updated and we remain coordinated across the
324 entire department. So part of that -- hhs.gov is a slice
325 of the department, but we have a Digital Advisory Council
326 that we work with CDC and NIH and CMS and all across the
327 entire department. So making -- doing our best to make
328 sure content is aligned.

329 And then the studio, it's like as -- anytime you see
330 someone being broadcast live from the department, that was
331 a result of the work at the studio. And then finally, I
332 mentioned that the individual who works on
333 campaigns -- major campaigns that were being launched by
334 any agency within the department, have them reviewed and
335 coordinated through the Office of the Assistant Secretary
336 of Public Affairs so that -- again, one of the major
337 coordination efforts over the years is around tobacco and
338 the prevention of tobacco is equities at NIH, equities at
339 FDA, equities at CDC, so making sure that was lined up.

340 So, again, the vast majority of what ASPA does is
341 sort of that coordination, collaboration, making sure HHS
342 is working in the messaging capacity as efficiently as

343 possible.

344 Q Sure. That's helpful. And I assume -- I know
345 that one of the major public health items that I'm sure you
346 were coordinating was the pandemic response efforts. Can
347 you talk just briefly about your primary roles and
348 responsibilities working on the pandemic response?

349 A Yeah, absolutely. My primary function was to,
350 I guess, develop and execute a public education campaign
351 around COVID-19. And my real initial entry into that
352 happened late June of 2020 when there was a letter that was
353 sent to Senator Daines from the department and -- if you're
354 having a hard time hearing me, maybe I can scoot up
355 or -- is that helpful?

356 Q Just --

357 A So it is in response to a letter from the
358 administration agreeing about the importance of a public
359 education campaign. I was asked to review the response to
360 that letter just to get a sense of does it seem consistent
361 with what the department would do and say. And, you know,
362 I made no edits to the letter, but I did review that
363 response.

364 And then -- so that's really where I began to get
365 involved with that campaign. And so, again, late June.

366 Q Late June. Okay. I think you mentioned
367 before you worked in ASPA coordinating across different

368 subagencies. Was ASPA able to actually edit the HHS
369 websites to talk about -- whether it's pandemic response or
370 any other type of public health materials?

371 A So absolutely. And, very important, ASPA does
372 not control the websites of the subagencies. So NIH
373 manages their own website, CDC manages their own website,
374 you know, FDA manages their own website, ACL, SAMHSA,
375 et cetera.

376 So what ASPA would be involved with editing/updating,
377 which we do on a regular day-to-day basis, would be the
378 hhs.gov, which really is pretty much almost all of the
379 offices, represents the offices within the Office of the
380 Secretary. So that would be where we were mainly involved.

381 Q Got it. But did you have the ability to, for
382 example, access the NIH website if you wanted to at ASPA?

383 A No.

384 Q Okay. Got it. Let me ask you, as the deputy
385 assistant secretary, were you involved in any other federal
386 response to other infectious diseases?

387 A In general the answer is no. I may -- you
388 know, that was not my primary responsibility in ASPA. I
389 might -- again, my primary focus was on the human services
390 portfolio. I would say, though, if you look at my years of
391 work at SAMHSA, managed and led a number of large public
392 education campaigns, underage drinking prevention, mental

393 health promotion, suicide prevention. The actual rapid
394 response campaign that HHS put together after Hurricane
395 Katrina, managed that as well. So quite a broad experience
396 in terms of public education campaigns.

397 And again, I would say -- not quite infectious
398 diseases, but the science of communication plays out
399 whether you're talking infectious disease or response to a
400 hurricane.

401 Q Sure. But, you know, other -- I'm thinking
402 perhaps the Ebola outbreak in 2014, was that not something
403 that ASPA was terribly involved in?

404 A So ASPA -- ASPA was very involved in Ebola,
405 Zika, West Nile virus, all of those. And I will say -- you
406 know, I will add for two -- probably about a total of two
407 years I also managed the public health portfolio in ASPA.
408 But those were only, like, temporary while additional folks
409 were being recruited to come in.

410 And again, ASPA would be critical in working with all
411 of the equities -- just we'll stick with Ebola just to say
412 that -- ASPA would be critical in working with the equities
413 involved in that effort and being a liaison with the
414 White House so that the White House would know what HHS was
415 planning on communicating, you know, after the policy had
416 been decided.

417 Q Got it. So setting the pandemic aside, in

418 ASPA, did you frequently communicate with officials in the
419 White House?

420 A It depends what topic. And you said setting
421 the pandemic aside, which would --

422 Q The coronavirus pandemic, yes.

423 A -- which would put us prior to that, you know,
424 the start date of our conversation. But it literally
425 depended on the topic. When it comes to the pandemic,
426 absolutely -- I cannot recall any conversation with anyone
427 at the White House related to the pandemic.

428 Q Got it. And just a foundational question, not
429 about the conversations you had.

430 A Sure.

431 Q But then as the pandemic set in, did you have
432 conversations with folks in the White House?

433 A No, not -- that was not -- I was copied on a
434 lot of e-mails, as you probably know, but did not have any
435 direct conversations with the White House.

436 Q Okay. And then over your tenure as the deputy
437 assistant secretary, did you interact with political
438 appointees of both administrations?

439 A Absolutely. So, you know, one of the -- I
440 failed to leave out in my brief introduction, but my entire
441 career I've worked for political appointees. I've never
442 worked for a career federal official, which is -- so I

443 worked for political appointees from the first Bush
444 Administration through political appointees for the Biden
445 Administration.

446 Q Got it. And it sounds like you worked closely
447 obviously across your career with political appointees.
448 During the period in question here, are you
449 familiar -- were there certain meetings or calls that only
450 political appointees were invited to attend and not career
451 folks?

452 A So I was not invited to any of those meetings,
453 if there were those meetings. So in -- I will say in the
454 normal course of business of any administration, there are
455 political meetings and there are career meetings and there
456 are mixed meetings. So normal course of business would
457 suggest that, yes, any administration has done that.

458 Q Great. I'd like to just move now a bit into
459 HHS's coronavirus work during early 2020, the first couple
460 of months. As I'm sure you know, in late January 2020
461 Secretary Azar declared a public health emergency in
462 response to the coronavirus. So around this time, late
463 January into February 2020, what was ASPA working on in
464 regards to the coronavirus?

465 A So I'll just remind you again of the
466 portfolios. I didn't go through all of the portfolios. So
467 there is the human services portfolio, which I was the lead

468 for. There is a public health service portfolio, which
469 Bill Hall was responsible for, the public -- the public
470 health portfolio, CDC, FDA, NIH. And then there's a health
471 care portfolio, which was led by Ryan Murphy. And that's
472 mainly CMS, AHRQ, Agency for Healthcare Research and
473 Quality, and the Health Resources and Services
474 Administration. So that's how we organize our work. And
475 it's, I think, really important to keep in mind where my
476 focus was at that time.

477 So at that time, related to the pandemic in late
478 January/early February, the main -- a main topic was
479 repatriating citizens from China. And I was called in
480 early on to help with that, coordinate the messaging around
481 that repatriation effort. It was about -- a period of
482 about a week the calls started ramping up. And the reason
483 why I was brought into that is the Administration for
484 Children and Families had the lead for the repatriation
485 efforts.

486 I distinctly remember a very long weekend of many,
487 many calls with officials from California, from the State
488 of Alaska, with DoD, State Department and others about, you
489 know, figuring out how to get individuals back from China.

490 It was very clear to me at that point in time -- and
491 again, given I was the person on the call from ASPA, it was
492 very clear to me what was missing at that point was the

493 public health perspective. This really was -- needed to be
494 more in a public health lane versus the human services. So
495 I had a conversation -- I remember that Monday, came into
496 the office -- I can't remember what Monday, but I remember
497 it was after a long weekend of calls, and I said, look,
498 this is a public health response. ACF can provide the
499 mechanism, but CDC and others need to get involved in this
500 quickly.

501 And that literally, again, end of January/early
502 February, was pretty much the end of my engagement around
503 the pandemic in my official capacity early on -- early on
504 until we got into that June conversation.

505 Q Got it. Okay. So understanding how the
506 portfolios are kind of separated there in different work
507 streams, but, you know, to your knowledge, working there at
508 ASPA on the pandemic messaging at the time, was ASPA
509 coordinating with other subagencies that you mentioned,
510 CDC, FDA, NIH, during these early months?

511 A Absolutely. That is part of the mission of
512 ASPA and that we coordinate messaging and -- around
513 high-profile issues, you know, so we actually -- and this
514 is clearly one of those high-profile issues. We don't get
515 down in the weeds on the day-to-day stuff. And so
516 absolutely ASPA would be coordinating messaging at that
517 point in time.

518 Q And was the White House also involved in
519 coordinating messaging?

520 A Yeah, absolutely. So again, ASPA is a place
521 where I say politics meets program. Politics lowercase P,
522 not capital P. I'm sure I'll have plenty of time to hear
523 about that later. But -- so it's like making sure an
524 administration is speaking with one voice. First of all,
525 HHS and then the entire administration.

526 Q Got it. Who would you say was overseeing the
527 coronavirus messaging around this time in the early months?

528 A So that would be -- the public health
529 portfolio falls under the purview of Bill Hall, and then
530 Bill Hall also reports to the assistant secretary for
531 public affairs. And at that time early on, Ryan Murphy was
532 the principal deputy assistant secretary for public, and he
533 was serving in the capacity as the office lead.

534 So Bill would work with Ryan and the other Schedule C
535 appointees that were here who would talk with the media and
536 others. So that would be that line of communication.

537 Q Do you recall who some of those Schedule C
538 appointees were?

539 A Yes. So at that point it would be
540 Caitlin -- now I'm going blank on the name. I can't
541 believe it. Michael Pratt -- Caitlin Oakley and Michael
542 Pratt being two of the key players.

543 Q Got it. Okay. Would you mind just walking me
544 through the approval process that HHS used for any pandemic
545 messaging during these initial months of the pandemic?

546 A Yeah, sure. So -- so basically, again, the
547 way it works, there is a lead agency. And when that lead
548 agency coordinates with other agencies that have equity,
549 that's usually a good thing because that means a package
550 would come to ASPA about an announcement that had already
551 been reviewed -- you know, I'll just stick with CDC here.

552 So CDC is about to make an announcement. They would
553 work with their counterparts at FDA and NIH or -- and if
554 for some reason it impacted I'll say a community health
555 center with HRSA, and then that package would come to ASPA
556 for the policy review.

557 Secretaries have counselors, so we would work with
558 the counselor to the Secretary to make sure that it would
559 be consistent with current policy. And then on
560 high-profile issues, pandemic being a high-profile issue,
561 then that material would be forwarded to the White House
562 for awareness and sometimes review and editing.

563 Often, you know, agencies don't do that coordination
564 before materials come to ASPA. So when agencies
565 say -- ASPA's then -- ASPA's responsibility then is to make
566 sure those agencies have visibility into what CDC is saying
567 and have an opportunity to comment on the content. And so

568 I call that the review and coordination across the
569 department. Again, making sure the department is aligned
570 in our messaging.

571 Sometimes CDC and NIH don't agree on something in
572 general, and we work it out at that point so that when a
573 package goes to the White House for an announcement, it is
574 representative of what the department thinks.

575 Q Got it. Okay.

576 A So it's, again, that review and coordination
577 role, alignment of the department, and then presenting
578 information or materials to the White House for either for
579 your information or for additional review and content.

580 Q Got it. So coronavirus messaging that was
581 coming that was out of HHS at this time in the early months
582 was going to the White House for approval or for edit?

583 A Absolutely. Absolutely. That's sort of
584 normal process in any administration. And I will add that
585 communication with the White House in most -- most all
586 times any administration is done from political appointee
587 to political appointee.

588 So as a career person, I package it up, maybe I work
589 out the differences between an agency, and then I present
590 it to the political appointees, here's what CDC is about to
591 announce. FDA, Office of General Counsel, everybody has
592 signed off. Tell me what to do next.

593 Q Sure.

594 A And then it goes over as a -- across town for
595 whatever happens there.

596 Q Got it. So as the pandemic took hold maybe
597 progressing into March, do you recall any additional
598 protocols or processes that were instituted before
599 coronavirus messaging or statements could be released?

600 A No, none whatsoever. I -- you know, I will
601 say we have a -- I call it -- it's called "The ASPA
602 playbook," and it outlines our policies and procedures.
603 That was the playbook we adopted and I continued to follow.
604 And again, that outlines exactly what I just said to you.

605 Q Got it. Okay. Let me ask you, going back to
606 the initial kind of months of the outbreak, this is
607 January, February, early March, do you recall any instances
608 where HHS officials or White House officials expressed any
609 disagreement with the coronavirus statements from CDC?

610 A You know, I wasn't in that chain, that loop of
611 conversation. I, like everybody else, watched the news
612 conference and followed along on the television. So again,
613 my main portfolio at that point in time was still the human
614 services portfolio.

615 Q Sure. And I think you maybe have alluded to
616 it, but something that's been documented is in late
617 February, Dr. Messonnier was speaking to the press and

618 mentioned -- warned that the public should prepare with the
619 expectation that this could be bad, this being the
620 coronavirus.

621 Do you recall any discussions in HHS around that time
622 regarding those statements?

623 A No. No. I watched the press conference like
624 everybody else.

625 Q Okay. So moving forward a bit, I do
626 understand that you are familiar with former HHS Assistant
627 Secretary for Public Affairs Michael Caputo --

628 A Yes.

629 Q -- and his senior advisor Dr. Paul Alexander,
630 both of whom I understand began working at HHS in or around
631 April 2020.

632 Does that sound correct to you?

633 A That's correct.

634 Q Okay. And you previously said you reported
635 directly to the assistant secretary. So safe to assume you
636 reported directly to Mr. Caputo?

637 A I did.

638 Q Okay. Who else reported directly to
639 Mr. Caputo?

640 A That would be -- so that would be Ryan Murphy,
641 Bill Hall, the organizational structure for the political
642 appointee Schedule Cs that -- they all pretty much reported

643 to the ASPA directly. So it would be -- again, I'll go
644 back to Caitlin Oakley, Michael Pratt, and there were some
645 additional Schedule Cs at that point in time. And so that
646 would be pretty much the direct line. And the -- I was
647 also -- also serving as the executive officer and the
648 deputy chief FOIA officer for the department at that time,
649 and in that position I reported to him as well.

650 Q Okay. And then on a similar note in terms of
651 organizational hierarchy, what was your position with
652 respect to Dr. Alexander?

653 A So my relationship with Dr. Alexander was to
654 bring him on board as directed. So we found -- brought him
655 on board as a -- initially as a volunteer consultant and
656 then as a paid consultant.

657 Q Okay.

658 A So my involvement in that was to work with
659 Presidential Personnel Office, the White House liaison, and
660 HR to make sure that things were done properly.

661 Q And who introduced you to Dr. Alexander as a
662 volunteer who needed to be onboarded?

663 A I don't recall specifically.

664 Q Okay. How did you view Dr. Alexander's
665 role -- we'll start with as a volunteer in ASPA?

666 A So Michael Caputo said to me directly that he
667 needed a science advisor because science was not his

668 expertise, and he wanted to bring on somebody that could
669 help him work through the science of what HHS is -- what
670 HHS is doing. That's pretty much --

671 Q Okay. And did you ever have a conversation
672 with Mr. Caputo about why he needed a personal science
673 advisor rather than a government scientist?

674 A No, I didn't.

675 Q Okay. Do you recall any instance in your
676 career where the assistant secretary has hired or onboarded
677 a volunteer science advisor?

678 A No.

679 Q How would you describe any changes to your
680 role in ASPA after Mr. Caputo and Dr. Alexander arrived?

681 A So given the focus of HHS was very much on
682 COVID, the COVID-19 response, the work that I was doing as
683 the executive officer really started to take additional
684 responsibilities. And what I mean by that, to be really
685 clear, is managing the HHS staff. You will recall there was
686 a time where everybody was -- we were told to go home. And
687 so working with the staff about what their concerns were,
688 how -- how they were feeling and the vulnerabilities.

689 So the human services portfolio itself was relatively
690 quiet -- never quiet, but relatively quiet -- and the
691 primary focus of my responsibility at the time was really
692 working with the staff and making sure they understood what

693 was going on and, again, working with the HHS-wide team on
694 how we were going to operate during the pandemic.

695 Q Okay. And with respect to Dr. Alexander, did
696 anything change with your role? Did the dynamic, would you
697 say, in ASPA have any changes after he was onboarded?

698 A No. It was -- again, every new employee
699 brings their personality to an office environment. And so
700 just like every new Schedule C that comes along,
701 Dr. Alexander added his dynamic to the office environment.

702 Q Did you think it was unusual -- I mean, you've
703 been at HHS for over 30 years -- for the assistant
704 secretary to bring on a personal science advisor?

705 A It was unprecedented from my standpoint. And
706 at the same time, I will -- I will add that as a career
707 civil servant, I see my role as the individual who helps
708 make the machine work for those individuals who represent
709 elected officials.

710 So, you know, how the organization's staffed and
711 structured and things like that, that really wouldn't be my
712 call. That would be the people working there as
713 representative of elected officials.

714 Q Sure. Recognizing it's not your call, did you
715 find it unusual that Dr. Alexander would be onboarded as a
716 science advisor during a pandemic given his background was
717 not in infectious diseases?

718 A It's, again, not my call. It's like PPO and
719 the White House liaison's office say here's a person.
720 Bring them on.

721 Q Sure.

722 A And my job is to make sure things are done
723 correctly and documented so that we can move forward with
724 the desire there.

725 Q Sure. And do you recall any conversations
726 around the time that Dr. Alexander was onboarded regarding
727 his qualifications?

728 A No.

729 Q Okay. Let me turn just briefly, then, to some
730 of your interactions with Michael Caputo --

731 A Okay.

732 Q -- who I know you were reporting to at the
733 time. Can you describe just a little bit more about your
734 working relationship with Mr. Caputo? Was he someone you
735 worked with closely?

736 A Yeah, I worked with him closely. I saw him
737 every day. When he came on board, I -- I will add that I
738 was here in the office, so I would see Michael almost every
739 day.

740 Q Okay. And just to your knowledge, are you
741 familiar with the officials or nongovernmental folks who
742 Mr. Caputo was consulting with about the coronavirus?

743 A No.

744 Q You're not aware of anyone he consulted with
745 about the coronavirus?

746 A No. I mean, I would -- he would consult with
747 folks across the government, he would consult with Paul
748 Alexander, but I don't know who he was consulting with.

749 Q Okay. Do you have any reason to believe he
750 had had communications with folks in the White House?

751 A Oh, absolutely. I mean, that's the job.
752 That's part of the job.

753 Q Sure. And about the coronavirus specifically,
754 correct?

755 A Yeah, absolutely. I mean, again, that's part
756 of the job. That's what the assistant secretary of public
757 affairs does is align the policy and, again, politics
758 lowercase P and craft effective messaging.

759 Q Sure. And do you know if some of those
760 specific folks, they ever saw him or have an understanding
761 that he was communicating with in the White House?

762 A No. No. I was not part of any of those
763 conversations and nor did I engage in them directly.

764 Q Okay. I'm going to turn back here to
765 Dr. Alexander just a bit more.

766 A Sure.

767 Q You mentioned he was brought on as a science

768 advisor. Can you give us a bit more color of what you
769 understood his position to be and what his portfolio
770 covered at HHS?

771 A Yeah. So again, his -- excuse me. Too much
772 talking today. Yeah, again, his main role was to serve as
773 a consultant to Michael Caputo about scientific documents,
774 medical information that was coming to ASPA for review and
775 coordination.

776 So again, I mentioned that process where information
777 will come from an agency, we make sure it's aligned across
778 the department, make sure it's consistent with policy. And
779 so Dr. Alexander was part of that process. He was brought
780 into that standard operating process of ASPA. And, you
781 know, what he talked with Michael Caputo about I don't
782 know. I wasn't part of that.

783 Q Sure. What juncture of that process you just
784 described did Dr. Alexander -- was he positioned at? As
785 messaging's coming up the chain, where did he
786 intervene -- where was he positioned in that approval
787 process?

788 A You know, he was part of the review team just
789 like I was. So when you see my name copied on a lot of
790 e-mails, it's not necessarily my lane, but he was part of
791 that review and coordination process.

792 Q Okay. And do you recall who -- any

793 conversations about placing Dr. Alexander in this review
794 process?

795 A Don't recall -- no, I don't recall any
796 conversation about placing him in the process. But again,
797 normal course of business for ASPA over the years is for a
798 Schedule C or political appointees to be part of that
799 process. So there was -- there was nothing out of the
800 usual about including him in the process.

801 Q I think you mentioned earlier that he brought
802 his own dynamic, I think the term was, to the agency. What
803 was this dynamic as you understood it or saw it?

804 A Well, he would comment on materials that would
805 come in and, you know, sometimes the comments were -- it
806 was like, "Oh, I don't think I would say it that way," but
807 that was -- that would be the extent of it for me. And
808 again, in support of open conversation and discussion about
809 science, and at the same time when a decision's made, it's
810 time to move forward.

811 Q Do you recall any of the statements that
812 you're referring to that you would not have phrased in that
813 way from Dr. Alexander?

814 A Nothing in particular. I mean, it was
815 just -- again, I was copied on almost all of his e-mails
816 and, you know, I would get -- I mean, I would get anywhere
817 from 1,000 to 2,000 e-mails a day here. It actually got a

818 lot worse than that at one point, but -- so, yeah, I really
819 didn't pay attention from the standpoint of not the lane of
820 my primary responsibility.

821 Q But it stood out to you when you saw some of
822 these e-mails, correct?

823 A The ones that I noticed occasionally.

824 Q Okay.

825 A And probably most of the ones that I paid
826 attention to were brought to my attention via the media
827 versus what was in my inbox.

828 Q Okay. And to put a finer point on it, why did
829 they stand out to you?

830 A They would stand out in a way from -- there's
831 sort of a normal discourse within the government, and
832 again, being respectful of your colleagues as you debate
833 the merits of the science. And sometimes they appeared to
834 be disrespectful of others. So that would be pretty much
835 what would stand out.

836 [Exhibit 1 was identified
837 for the record.]

838 BY [MAJORITY COUNSEL].

839 Q Okay. Let's turn to some of the e-mails you
840 maybe were alluding to. I'll ask you to look at Exhibit 1.
841 Do you have your exhibit packet or however you're --

842 A Here.

843 Q Okay. Excellent. And I will direct you to
844 page SSCC-0014339. And while you're flipping, I'll just
845 state for the record this is a May 19, 2020 e-mail exchange
846 between Dr. Alexander and HHS officials, including you.
847 And the subject line is, "High confidential_meta analysis
848 of Remdesivir data."

849 Now, as an initial matter, Mr. Weber, you'll see that
850 this was sent from what appears to be Dr. Alexander's
851 personal Yahoo account and it was sent to what appears to
852 be Mr. Caputo's personal Gmail account. So how often do
853 you recall receiving e-mails regarding official agency
854 business from a government official's personal e-mail
855 account?

856 A If the e-mail is directed to me, I would
857 immediately say please send this from your government
858 account and I will loop your government account into this
859 correspondence.

860 Q Sure. But I guess more generally, if it
861 wasn't directed to you, did you often see e-mails regarding
862 official business from government employees' personal
863 e-mail addresses during the time in question?

864 A No. And that would be -- it's just a clear
865 violation of government policy.

866 Q Okay. Do you recall seeing it happen more
867 than once or twice?

868 A I didn't keep count. I don't know.

869 Q What about any messages from personal
870 cellphones? Do you recall ever receiving or having
871 conversations --

872 A No.

873 Q -- about --

874 A No, I do not. Yeah, I do not.

875 Q Okay. I'll direct you to the last paragraph
876 in this e-mail. Dr. Alexander writes, "Can we set a
877 presentation for me to present this to folk like Dr. Fauci,
878 et cetera, and folk at the White House?"

879 Are you aware of any instances where Dr. Alexander
880 presented to the White House?

881 A I'm not.

882 Q Pardon me if you hear that. There are some
883 alarms going off like they're voting. They're not.
884 But -- pardon me.

885 Are you aware of any time where Dr. Alexander
886 communicated with Dr. Fauci?

887 A I am not.

888 Q What about with other folks on the White House
889 Coronavirus Task Force?

890 A I'm not aware of that.

891 Q And any White House officials?

892 A Not -- I don't recall any.

893 [Exhibit 2 was identified
894 for the record.]

895 BY [MAJORITY COUNSEL].

896 Q Okay. I'll ask you then to turn to the next
897 exhibit, Exhibit 2. And while you're flipping pages there,
898 I will state for the record -- and actually stepping back,
899 I'll direct you to page SSCC-0018140. So this is an August
900 6, 2020 e-mail from Brad Traverse to you and to other ASPA
901 officials. And the e-mail reads, "Please confirm ASAP Paul
902 Alexander's employment status as an HHS employee and not a
903 contractor."

904 So just taking a step back, who's Brad Traverse and
905 what was his role at HHS?

906 A So Brad Traverse was brought on by Michael
907 Caputo, and he served as a senior advisor to Michael Caputo
908 as well, and more of in a chief of staff manner.

909 Q Okay. Do you recall when he joined HHS,
910 roughly?

911 A He -- you know, Michael and Brad came in
912 pretty much about the same time together. So, you know,
913 Michael came in in April. I'm pretty sure Brad came in at
914 the exact same time. Maybe two weeks later, I mean, but
915 very close.

916 Q Sure. We talked a bit before about who
917 reported to Mr. Caputo. Did Mr. Traverse report directly

918 to Mr. Caputo?

919 A Yes.

920 Q And was it Mr. Caputo's decision to hire
921 Mr. Traverse?

922 A White House liaison and PPO makes those
923 decisions.

924 Q Do you have any awareness of whether that was
925 based on Mr. Caputo's recommendation?

926 A No, I don't know.

927 Q What was your understanding of why
928 Mr. Traverse was being brought on to HHS at this time?

929 A And again, I mentioned serving in a chief of
930 staff role just -- and he functioned that way.

931 Q But as compared to before Mr. Caputo joined,
932 was no one serving in that function?

933 A No, we did not have a chief of staff.

934 Q So why was one needed after Mr. Caputo joined?

935 A I don't know why he was brought on board in
936 particular.

937 Q Okay. We see here, as I quoted some of the
938 e-mail in regards to Dr. Alexander's employment status, you
939 mentioned earlier that Dr. Alexander was a volunteer and
940 then he did become a paid employee or paid expert I think
941 you said.

942 A That's correct.

943 Q Can you give me a bit more color based off
944 your tenure there about how Dr. Alexander's employment was
945 structured throughout his tenure?

946 A Again, the initial days, again, an unpaid
947 special expert consultant role. And then, if I recall
948 correctly, early July of 2020, he was brought on as a paid
949 consultant at the GS-15 level. That just stuck in my mind
950 there. And he served in that role until he was -- until he
951 left the department.

952 Q Do you recall why Dr. Alexander switched from
953 being a volunteer to a GS-15?

954 A I don't know. Again, I -- that would be a
955 decision made outside of my lane.

956 Q Do you recall who told you about the change?

957 A I don't recall specifically. Again, what my
958 role was as the acting executive officer is to make sure
959 that HR policies were being followed, that things were done
960 in a way that we could bring him on board as a paid expert
961 consultant.

962 So the documentation of maybe things that -- things
963 that I signed would be bringing him on board like any other
964 expert consultant that would be hired by anyone within HHS.

965 Q Okay. So who would be authorized to bring
966 Dr. Alexander on as a GS-15 employee?

967 A Again, that would just work through the HR

968 process. So a request would be made. I don't know who
969 made that request. And then I would work with HR to make
970 sure that the documentation was put together.

971 Q Okay. In this particular instance
972 here -- turning back to the e-mail, it's August 6,
973 2020 -- do you recall why Mr. Traverse was asking you to
974 confirm ASAP Dr. Alexander's employment status?

975 A I don't know why Brad was asking this at this
976 time.

977 Q Okay. Sitting here today, do you have any
978 idea why he might have been asked that at this time?

979 A No. I think the documentation shows that he
980 had brought on -- he was brought on board in July.

981 Q Okay. Maybe just to put a finer point on it,
982 looking later on in this e-mail chain, Mr. Traverse
983 responds that he spoke with Dr. Alexander, who told him
984 that he received confirmation from HR that he is an HHS
985 employee. And then later that day, if you look up in your
986 e-mail chain, Mr. Caputo responds that he still wants
987 direct OHR confirmation of this.

988 Do you recall why Mr. Caputo was insisting here on
989 OHR's confirmation?

990 A I don't know.

991 Q Would you have been involved in the OHR
992 confirmation process?

1018 infected form others and not via a vaccine." I think
1019 "form" is a typo. It should be "from?"

1020 Mr. Weber, are you aware of any discussions regarding
1021 a herd immunity via natural infection strategy?

1022 A No, I was not aware or partook in any
1023 conversations on that topic.

1024 Q Do you recall having any conversations or
1025 discussions with officials about a focused protection
1026 strategy?

1027 A No.

1028 Q Do you recall ever being instructed to message
1029 around the coronavirus in a way that focused on allowing
1030 individuals to get infected with the virus as a means of
1031 containing it?

1032 A No.

1033 Q Okay. I'll direct you to the third paragraph
1034 here. Dr. Alexander writes, "If we can message the younger
1035 folk to go out, spread it, including our children in
1036 primary school, et cetera, help us get to herd fast, but
1037 don't spread it to frail older immune-compromised people,
1038 then I think we can beat this."

1039 So just taking a quick step back, was ASPA involved
1040 in developing or messaging any of the administration's
1041 school reopening guidance?

1042 A Not that I'm aware of. Again, not part of my

1043 portfolio.

1044 Q Okay. What was your reaction when you
1045 received this e-mail to the contents of what Dr. Alexander
1046 was describing here?

1047 A I don't recall.

1048 Q You don't -- do you recall having any
1049 discussions with anyone about Dr. Alexander's statements?

1050 A No.

1051 Q Do these statements strike you as the normal
1052 communications process amongst colleagues at HHS?

1053 A So I think I mentioned previously the concerns
1054 I had with Dr. Alexander, sometimes the disrespectful
1055 nature of some of his communications, which would be part
1056 of my work as the executive officer ensuring that
1057 communications with staff within ASPA were maintained in an
1058 appropriate way.

1059 Q Sitting here today, what's your reaction to
1060 this e-mail?

1061 A He obviously had an opinion.

1062 Q Are you aware of anyone else in HHS who had
1063 the same opinion?

1064 A I'm not. And again, I'll go back, I'm all for
1065 people having open conversations and discussions about
1066 science and sharing ideas, and that's something that I've
1067 embraced my entire career. But, you know, you take the

1068 opinions, you put together, you come up with a strategy and
1069 move forward.

1070 Q Were these ideas ever part of the strategy as
1071 you understood it?

1072 A No, not that I'm aware of.

1073 Q Did you ever see any instance where they
1074 influenced strategy?

1075 A Not that I'm aware of, no.

1076 [Exhibit 4 was identified
1077 for the record.]

1078 BY [MAJORITY COUNSEL].

1079 Q Let's go to the next document here, Exhibit 4.
1080 I will direct you to page SSCC-0007223. And this is a July
1081 4, 2020 e-mail from Dr. Alexander to you and other ASPA
1082 officials. Subject line, "Fauci says now today on the news
1083 that vaccine will not get us to herd alone. That means
1084 intuitively that means we'll need infected people."

1085 I'll just ask you -- a different e-mail, perhaps
1086 similar context. How did you interpret this e-mail when
1087 you received it at the time?

1088 A So again, I don't remember receiving this
1089 e-mail. And as I mentioned before, I get 1,000 to 2,000
1090 e-mails conservatively on a day-to-day basis. And again,
1091 this would not be in my purview of work. So knowing that
1092 it would be well handled by my colleagues, it is not

1093 something I'd pay attention to.

1094 Q Okay. I will just direct you to the third
1095 paragraph there. "Dr. Alexander's views he's expounding
1096 upon and says, with regards to certain people, 'We want
1097 them infected.'"

1098 Are you aware of anyone in HHS whoever raised
1099 concerns about this approach?

1100 A No, I'm not. I'm not aware of any -- I'm not
1101 aware of anyone raising concerns.

1102 Q Did you have concerns about an approach of
1103 wanting people to get infected?

1104 A Again, I don't even remember this e-mail.

1105 Q Sitting here today looking back, it's July of
1106 2020, do you have any impressions about that approach?

1107 A Yeah, I would just say he had an opinion. It
1108 doesn't mean it became policy.

1109 Q I'll direct you to the last paragraph there
1110 from Dr. Alexander. He writes, "And stop Fauci from
1111 talking. He is confusing people."

1112 Were Dr. Fauci's coronavirus recommendations ever
1113 discussed in ASPA?

1114 A Not that I'm aware of.

1115 Q So when you were working on messaging or
1116 coordinating amongst agencies, Dr. Fauci's recommendations
1117 or guidance was not something you ever discussed?

1118 A No. Not me.

1119 Q Do you recall if others were discussing -- are
1120 you familiar with others who were discussing Dr. Fauci's
1121 statements or guidance?

1122 A Not that I know. Again, not in my line of
1123 responsibility.

1124 Q But even outside of that, you know, around the
1125 proverbial watercooler, do you ever remember anyone talking
1126 about Dr. Fauci's guidance or recommendations?

1127 A If I started talking about watercooler
1128 conversations, we'd go down a different path. So I'd
1129 rather talk about things I know about versus don't know
1130 about.

1131 Q Well, I only mean conversations that you had
1132 direct knowledge of, of course, around any watercooler.

1133 A No, nothing -- I was not involved in these
1134 conversations. I just was copied on the e-mails. And
1135 again, these are e-mails that were being taken care
1136 of -- or the action would be taken care of through a
1137 different chain. And only unless I was asked to get
1138 involved would I get involved with this.

1139 Q Okay. Let's move on from this document here.
1140 I'd like to ask you about a meeting that occurred on
1141 October 5, 2020. It's been reported, and Secretary Azar
1142 also tweeted about a meeting he had with a group of

1143 scientists who --

1144 Mr. Barstow. Hey, [Redacted]?

1145 BY [MAJORITY COUNSEL].

1146 Q -- reported a -- who it's been reported
1147 supported a herd immunity via infection strategy --

1148 Mr. Barstow. [Redacted], we did not --

1149 [Majority Counsel]. Yes.

1150 Mr. Barstow. We did not hear --

1151 [Majority Counsel]. Sorry, what was that, Kevin?

1152 Mr. Barstow. We could not hear the date that you
1153 said.

1154 [Majority Counsel]. Got it. I'll back up.

1155 BY [MAJORITY COUNSEL].

1156 Q So it's been reported that Secretary Azar met
1157 with a group of scientists on October 5, 2020, and that
1158 these scientists supported a herd immunity via infection
1159 strategy. And, in fact, Secretary Azar tweeted about this
1160 meeting following this occurrence.

1161 Do you recall the meeting that I'm referencing here,
1162 Mr. Weber?

1163 A No, I don't recall and did not participate.

1164 Q Okay. And the meeting was with, again,
1165 Secretary Azar and Dr. Scott Atlas, Dr. Martin Kulldorff,
1166 Dr. Jay Bhattacharya and Dr. Sunetra Gupta.

1167 Does that refresh your recollection at all about this

1168 meeting?

1169 A No. I -- the only individual that you named
1170 that is -- I have any recollection of is Dr. Atlas, and
1171 that's because of his news media coverage. Never met
1172 Dr. Atlas.

1173 Q Okay. I understood that Dr. Atlas was a
1174 special advisor to the President on the coronavirus. Do
1175 you have any personal knowledge about his involvement in
1176 the pandemic response?

1177 A No, I do not.

1178 Q You never communicated with him in any
1179 fashion?

1180 A No.

1181 Q Are you aware of anyone in ASPA who
1182 communicated with him?

1183 A Not -- no, I'm not aware of anybody
1184 communicating with him.

1185 Q Okay. So after this October 5 meeting,
1186 Secretary Azar tweeted, he said, "Today I met with
1187 Dr. Atlas and three distinguished infectious disease
1188 experts to discuss COVID-19 science and data from around
1189 the world."

1190 I believe you previously mentioned that in your role
1191 you were involved in the social media of HHS. Who was
1192 involved in managing Secretary Azar's Twitter account?

1193 A So that would be Michael Pratt and Caitlin
1194 Oakley.

1195 Q Okay. Did you have any involvement in
1196 operating his Twitter account?

1197 A No. The involvement would be to make sure
1198 it's working.

1199 Q Sure.

1200 A I was always involved when it didn't work.
1201 Let's put it that way.

1202 Q Sure. So based on your experience there, is
1203 it safe to say one of those two individuals would have
1204 drafted this tweet?

1205 A It's quite possible. They are usually the two
1206 that would have drafted those kinds of tweets.

1207 Q Okay. I think we're close to our first hour
1208 here. Let me just get one quick minute, Mr. Weber, to
1209 check my notes.

1210 [Pause.]

1211 [Majority Counsel]. Okay. I think this is a good
1212 place to take our first hour break -- I'm sorry, our first
1213 five-minute break at the hour --

1214 The Witness. Darn it.

1215 [Majority Counsel]. Sorry, Mr. Weber.

1216 The Witness. That's okay.

1217 [Majority Counsel]. And I think with that, unless

1218 anyone else has something to add, we can go off the record.

1219 [No response.]

1220 [Majority Counsel]. Great. We will take a
1221 five-minute break.

1222 The Witness. Thank you.

1223 [Recess.]

1224 [Majority Counsel]. So for this round our Minority
1225 colleagues will be asking questions. So whoever that's
1226 going to be from the Minority, I -- Kevin, is everyone back
1227 from HHS's end?

1228 The Witness. Yes.

1229 Mr. Barstow. We're good.

1230 [Majority Counsel]. Okay. I'll turn it over to you,
1231 Minority staff.

1232 [Minority Counsel]. Thanks, [Redacted].

1233 BY [MINORITY COUNSEL].

1234 Q Mr. Weber, thanks for being here today. I
1235 just wanted to go over a few of the things you said the
1236 first hour.

1237 A Sure.

1238 Q You've been -- you were at ASPA from 2012 to
1239 2021; is that correct?

1240 A Correct. Correct.

1241 Q Spanning three different presidential
1242 administrations. You said a major part of your job at ASPA

1243 was coordinating policy and messaging. Is that a fair
1244 characterization?

1245 A Coordinating the messaging around policy at
1246 that -- we like to make policy at ASPA, but that's not how
1247 it works.

1248 Q Yeah. Does that -- does that include clearing
1249 various print, new media, TV, other media statements from
1250 the subagencies that were within your purview? Maybe
1251 clearing is not the right word. Reviewing?

1252 A You know, some people call it clearing. I
1253 call it review and coordination. Because my basic premise
1254 is that we are not the experts; that we need to make sure
1255 the experts have the opportunity to weigh in on the
1256 messaging that the department will be using so that we are
1257 as aligned as possible. So, yeah.

1258 Q So it would not be uncommon for a subagency
1259 within your purview to send to you, "This person is going
1260 on this TV channel and going to say this," and you would
1261 review that?

1262 A Absolutely. Absolutely. That is the normal
1263 course of business.

1264 Q Okay. And that happened throughout the three
1265 presidential administrations that you worked for?

1266 A Absolutely.

1267 Q You also said ASPA has worked on -- I know

1268 "public health emergency" is a term of art, but I'm going
1269 to use it generally -- various public health emergencies,
1270 Ebola, Zika, West Nile and others across the various
1271 administrations that you worked in. So it makes sense that
1272 it worked on coronavirus as well?

1273 A Absolutely.

1274 Q And it wasn't odd that the public affairs
1275 would be interested in coordinating the pandemic response?

1276 A Not at all. That is, again, mission of the
1277 office.

1278 Q Was -- so again, spanning three different
1279 administrations, was the White House also involved in the
1280 Ebola, Zika and West Nile efforts?

1281 A So I'll go -- that's a little before the scope
1282 of this inquiry, but standing policy of ASPA is, yes,
1283 that's how it works.

1284 Q I appreciate it. I'm just trying to get
1285 context as to what is consistent.

1286 A Sure. Mm-hmm.

1287 Q You also said that you met with Mr. Caputo
1288 near daily; is that accurate?

1289 A Absolutely.

1290 Q When -- post -- before you retired, did you
1291 meet with the new ASPA as well in a regular fashion?

1292 A Yes.

1293 Q So that wasn't out of the ordinary, the number
1294 of times you would meet with Mr. Caputo?

1295 A No. No. Again, consistently through my time
1296 at ASPA.

1297 Q And you also said that you were aware that
1298 Mr. Caputo was coordinating or at least talking to various
1299 people within the White House. Is that consistent across
1300 your tenure at ASPA?

1301 A Yes.

1302 [Exhibit A was identified
1303 for the record.]

1304 BY [MINORITY COUNSEL].

1305 Q Thank you. I want to turn to Exhibit 1 that
1306 we sent over to you. It's SSCC-0022255. It's an e-mail on
1307 August 16 from Mr. Caputo to Dr. Alexander. And the
1308 original e-mail is Dr. Alexander --

1309 A Hold on one second. Hold on one second. I'm
1310 trying to find this.

1311 Q Okay. Sorry.

1312 Mr. Barstow. You want me to --

1313 The Witness. Yeah, go ahead.

1314 [Majority Counsel]. Hey, [Redacted]?

1315 [Minority Counsel]. Yeah.

1316 [Majority Counsel]. If you're going to introduce
1317 exhibits, since we used numbers, do you want to use letters

1318 just to keep them separate for the court reporter?

1319 [Minority Counsel]. Sure. So this can be A.

1320 Mr. Barstow. Did you just send those over?

1321 [Minority Counsel]. Yes, I just sent them over right
1322 after the first hour of questioning.

1323 Mr. Barstow. I don't think we printed those off yet,
1324 so Mr. Weber doesn't have those. So if you'd give us a
1325 couple minutes, we can make sure he has them.

1326 [Minority Counsel]. Yeah, no problem.

1327 [Pause.]

1328 Mr. Barstow. We have them printed off, so we're
1329 ready to go when you are.

1330 [Minority Counsel]. Thank you.

1331 The Witness. All right. Back on here.

1332 BY [MINORITY COUNSEL].

1333 Q Awesome. Mr. Weber, do you have --

1334 A Sorry, I had the deer-in-the-headlight look
1335 there for a moment.

1336 Q No problem. So Exhibit A, which is Bates
1337 numbered SSCC-0022255, is that in front of you?

1338 A I have it.

1339 Q Okay. So the original e-mail from
1340 Dr. Alexander on August 15, 2020 is kind of long. It's to
1341 Dr. Casey, who at the time was the acting editor-in-chief
1342 of the MMWR. And the subject line says, "Can I send this

1343 to the CDC, please, for a report?" And he e-mails it to
1344 Mr. Caputo. Mr. Caputo responds, "No, Paul. This is a
1345 rant, not a review."

1346 Is that kind of standard course of business
1347 for -- you said Dr. Alexander can be a little -- I don't
1348 remember what word you used. But is this kind of -- were
1349 you aware of this e-mail?

1350 A I was not aware of this e-mail. This is the
1351 first time I'm seeing this one. And obviously, I'm not
1352 even copied on it.

1353 Q Does this appear to you like it -- how
1354 Dr. Alexander's advice was often responded to?

1355 A You know, I don't have any perspective on the
1356 body of work, so I wouldn't know. And again, when I
1357 mentioned about my interventions around Dr. Alexander's
1358 e-mail, it's about interaction with staff at ASPA in terms
1359 of having a respectful relationship with staff.

1360 [Exhibit B was identified
1361 for the record.]

1362 BY [MINORITY COUNSEL].

1363 Q Okay. We'll go to letter B now, which starts
1364 on SSSC-0022246.

1365 A I have it.

1366 Q It's an e-mail of similar length from
1367 Dr. Alexander on September 12, 2020 to Mr. Caputo. And

1368 Mr. Caputo responds in all caps "LEAVE IT ALONE."

1369 Were you aware of this e-mail?

1370 A I was not.

1371 Q Do you -- is it common -- was this level of
1372 interaction with Dr. Alexander to others common? Would he
1373 often provide this kind of advice in the kind of normal
1374 course of business?

1375 A So again, I'm going to go back to not in my
1376 purview to be paying attention to this. And so this would
1377 be part of the discourse between Michael Caputo,
1378 Dr. Alexander and others. So, you know, Michael Caputo
1379 or -- as a senior advisor on science, then I imagine
1380 Dr. Alexander is providing his advice. That's what
1381 his -- what's here.

1382 [Exhibit C was identified
1383 for the record.]

1384 BY [MINORITY COUNSEL].

1385 Q Then we'll go to C, which is SSCC-0022235.
1386 Again, correspondence between Mr. Caputo and Dr. Alexander.
1387 And the last line of Mr. Caputo's e-mail back is, "Don't
1388 send any e-mails to anyone outside ASPA until further
1389 notice."

1390 Do you think -- so you said earlier that you were not
1391 aware of anyone within HHS that shared Dr. Alexander's
1392 opinion on herd immunity. Do you think this kind of -- do

1393 you think Mr. Caputo shared that view?

1394 A So I don't know what Michael Caputo would be
1395 thinking, so I'd have to -- you'd have to ask him. And to
1396 be clear, I was not part of any conversation around herd
1397 immunity, just to make sure that's clear.

1398 Q Were you aware of any of these e-mails prior
1399 to just now?

1400 A No.

1401 Q Was it common or typical for Dr. Alexander to
1402 share his thoughts on e-mails that you were copied on on
1403 various guidances, reports, messaging strategies?

1404 A Yes. I mean, that's very clear in the record.
1405 He shared his perspective and, as I said, he had an
1406 opinion. And I value the opportunity to share opinion and
1407 review the science, and at the same time ultimately a
1408 decision is made and one must respect that decision moving
1409 forward.

1410 Q Were some of his suggestions over the -- I
1411 think his eight-month or nine-month tenure taken or
1412 accepted?

1413 A I don't know.

1414 Q Obviously based on the last three exhibits,
1415 some of them were declined.

1416 A That appears to be so.

1417 Q Is that kind of normal course of business in

1418 scientific messaging, like you want to listen to as many
1419 voices as possible and find the right path forward?

1420 A Absolutely. That is how we use science in
1421 this department. You know, it's like you bring together
1422 some of the best thinking individuals, and as I said, a
1423 decision is made and we move forward.

1424 Q So it would not be -- you said there hadn't
1425 been a senior science advisor within ASPA before, but it
1426 would not be uncommon for ASPA to take various perspectives
1427 into account while developing the messaging?

1428 A Absolutely. That is -- that is standard
1429 practice.

1430 Q Across your entire tenure, all three
1431 administrations?

1432 A Absolutely.

1433 Q All right. Thank you.

1434 [Minority Counsel]. I think that's all we have for
1435 our hour.

1436 Mr. Barstow. Do you want to keep going?

1437 [Majority Counsel]. [Redacted] --

1438 The Witness. I'm happy to keep going.

1439 [Majority Counsel]. [Redacted], your side's done for
1440 now?

1441 [Minority Counsel]. Yes. Yes.

1442 [Majority Counsel]. All right. Again, Mr. Weber, we

1443 can either take a five-minute break or I think we're happy
1444 to plow ahead if you all are.

1445 Mr. Barstow. Let's keep going, [Redacted].

1446 [Majority Counsel]. Okay. Great. Let's see, so --

1447 [Exhibit 5 was identified

1448 for the record.]

1449 BY [MAJORITY COUNSEL].

1450 Q Mr. Weber, turning back to, I think, our
1451 packet of exhibits, so the ones that are numerically
1452 structured, I'll ask you to look at Exhibit 5. And while
1453 you're flipping there, I will state for you that this is a
1454 June 21, 2020 e-mail from Dr. Alexander to you and other
1455 ASPA officials. Subject line, "Key stories in Sunday 21st
1456 HHS bulletin and what the important messaging must be now.
1457 My suggestion for your consideration."

1458 So just off the bat, you said Dr. Alexander was a
1459 science advisor. Did you understand his role to be focused
1460 on messaging?

1461 A Again, his role was to advise Michael Caputo
1462 on the science, and that would help shape messaging. So
1463 sort of indirectly, yes.

1464 Q But your understanding of his role was he was
1465 not a communications specialist?

1466 A No, he was not.

1467 Q Okay. You'll see in this e-mail, it's

1468 directed to Michael, that Mr. -- Dr. Alexander directs him
1469 to the fourth bullet below, which Dr. Alexander says is a
1470 critical issue.

1471 And the fourth bullet headline reads, "President
1472 Trump's testing comments 'appalling,' Biden campaign
1473 official says." So taking a step back, would ASPA have
1474 been involved in developing or working on the messaging
1475 around the administration's testing policies or approach?

1476 A Not -- not that I'm aware of. I mean, again,
1477 wouldn't be part of what I would work on.

1478 Q So not you specifically, but was ASPA involved
1479 in developing any messaging around testing, to your
1480 knowledge?

1481 A I do not know.

1482 Q If ASPA wasn't working on pandemic testing
1483 messaging, where -- who within the administration would
1484 have been working on that?

1485 A It would just be a matter of me speculating.
1486 So I don't know.

1487 Mr. Barstow. [Redacted], I don't think he -- I don't
1488 think Mr. Weber said that ASPA wasn't working on it. I
1489 think he said he's not aware whether ASPA was working on
1490 it, which I think is a distinction.

1491 [Majority Counsel]. Sure. Thanks for that
1492 clarification, Kevin.

1493 BY [MAJORITY COUNSEL].

1494 Q Mr. Weber, on that finer point, I know you
1495 mentioned your own work stream at ASPA. Was there a
1496 particular individual in ASPA who worked on the pandemic
1497 messaging more specifically?

1498 A Yeah. I would say Michael -- Michael Pratt
1499 was key in that work.

1500 Q Okay. And did Mr. Pratt, did he work on
1501 guidance documents, messaging around guidance documents
1502 surrounding the pandemic?

1503 A I don't know. I was not involved in, nor did
1504 I see any of the guidance documents that were subsequently
1505 released.

1506 Q Okay. I'll direct you to the fourth bullet
1507 here -- sorry, returning to the fourth bullet underneath
1508 the heading I just read, Dr. Alexander continues writing,
1509 "The news and Biden's camp is saying the President at the
1510 rally admitted that he slowed testing for his political
1511 benefit and it's not for the American people."

1512 Big picture, are you familiar with what Dr. Alexander
1513 is referring to here?

1514 A I have no idea.

1515 Q Okay. Just to refresh your recollection, on
1516 June 20, the day prior to this e-mail, former President
1517 Trump said during a campaign rally, "When you do testing to

1518 that extent, you're going to find more people, you're going
1519 to find more cases. So I said to my people, 'Slow the
1520 testing down, please.'" And I'll note this was a widely
1521 reported campaign event.

1522 Does that refresh your recollection about what
1523 Dr. Alexander might have been referring to here?

1524 A So I recall the event. I can't say I know
1525 that this is directly related to that.

1526 Q Okay. Do you recall any reaction inside HHS
1527 after the President made those statements?

1528 A No.

1529 Q Did you ever have any conversations with
1530 anyone in HHS about messaging on testing for the
1531 coronavirus?

1532 A I did not.

1533 Q I'll also ask you here, Dr. Alexander is
1534 talking about statements made by a Biden campaign official.
1535 Was it common for HHS officials, in your experience, to
1536 discuss then candidate Biden's campaign during work?

1537 A No, it's not common.

1538 Q In your experience, was it common to discuss
1539 President Trump's campaign during work?

1540 A Not common. And again, not a part of our
1541 standard policies.

1542 Q But it did happen?

1543 A This e-mail shows that it happened. But
1544 again, I wasn't part of any of this. You know, again, just
1545 being a career federal official, recognizing my role here
1546 is to make sure programs are running well and aligned. So
1547 campaigning, such things are not part of anything that I do
1548 ever.

1549 Q Sure.

1550 [Exhibit 6 was identified
1551 for the record.]

1552 BY [MAJORITY COUNSEL].

1553 Q Okay. Let's turn to the next exhibit,
1554 Exhibit 6, which again, I'll state for the record here is a
1555 June 24, 2020 e-mail from Dr. Alexander to you, Mr. Caputo
1556 and Mr. Traverse. "Subject line: On the testing and cases
1557 issues." Dr. Alexander opens the e-mail writing that, "The
1558 key message has to be," and proceeds to write, "There is a
1559 rise in cases due to testing and also simultaneously due to
1560 the relaxing of restrictions, less social distancing."

1561 So do you recall why Dr. Alexander was sending just
1562 the three of you a key message on testing and cases?

1563 A I have no idea why he chose to narrow his
1564 "To:" list.

1565 Q Did you ever have any conversations with
1566 Dr. Alexander about the coronavirus directly?

1567 A You know, again, as a matter of interacting

1568 with him occasionally, he might talk about what he's
1569 working on, but nothing in an official capacity.

1570 Q Do you recall him telling you anything he was
1571 ever working on in respect to coronavirus?

1572 A No.

1573 Q Do you recall when you would have spoken with
1574 him about the coronavirus?

1575 A No, I don't have any specific recollections of
1576 conversations about coronavirus.

1577 Q About anything -- well, strike that.

1578 A No. I mean, again, I'll go back to this was
1579 not my lane of operations. If Michael Caputo or somebody
1580 had specifically asked me to address any of this, you would
1581 see e-mails from Mark Weber responding to these. That's,
1582 you know, the one thing that we don't see is any e-mails
1583 from Mark Weber responding to all of these. So I was never
1584 directed to engage on any of this.

1585 Q Sure.

1586 A So anyway, just to share that.

1587 Q No, no, I appreciate that.

1588 You know, the three individuals on here, Mr. Caputo,
1589 you, Mr. Traverse, whose lane would this have been if it
1590 wasn't yours with respect to messaging on testing and
1591 cases?

1592 A So the lane would be Michael Caputo and Brad

1593 Traverse as being chief of staff to make sure that it was
1594 managed up -- or around, yeah.

1595 Q Taking even a step back further, talking about
1596 your interactions with Dr. Alexander, did Dr. Alexander
1597 ever have an office in HHS?

1598 A He did.

1599 Q He did?

1600 A Yep.

1601 Q Where was the office?

1602 A It was in the ASPA suite, which it's on the
1603 sixth floor here in the Humphrey Building.

1604 Q Sure. In June 2020, at the time of the
1605 pandemic, did Dr. Alexander work in person or was he mostly
1606 remote?

1607 A I would say about 50/50, yeah. So he was a
1608 presence in the building, and there are -- so anyway, yeah,
1609 I would go 50/50.

1610 Q Okay. Similar with Mr. Caputo. Did he work
1611 at the HHS building?

1612 A He was in the office most every day.

1613 Q And anyone else in the ASPA suite --

1614 A So it would be -- Brad Traverse was in the
1615 office most every day, Michael Caputo's executive assistant
1616 was in the office -- blanking on her name right now -- and
1617 Gordon Hensley, who was also a senior advisor. They were

1618 in the office, as well as myself. So pretty much
1619 that -- those were the folks who came in on a daily basis.

1620 Q Okay. Great. Do you have any --

1621 A Let me -- a quick little qualification --

1622 Q Sure.

1623 A -- just to be clear, because of the incredible
1624 work they did. Our -- we maintained the studio operations
1625 24/7 throughout the pandemic in case of any need to -- for
1626 emergency communications whatsoever. So the studio team
1627 was on site at all times.

1628 Q Okay. Got it.

1629 During these times, was Secretary Azar frequently in
1630 the office?

1631 A I wouldn't know. I didn't keep track of his
1632 schedule.

1633 Q Sure. Do you have any awareness of whether
1634 his chief of staff, Brian Harrison, was there in the
1635 office?

1636 A You know, I don't know to what extent. Again,
1637 I will go back with just the Secretary, occasionally the
1638 Secretary would go to the studio. So that would mean the
1639 he was in the office. But as for the rest of the team, I
1640 don't know.

1641 Q Do you recall any instances during these
1642 periods where the Secretary was in the office attending

1643 conversations with Dr. Alexander?

1644 A No.

1645 Q What about his chief of staff, Brian Harrison.
1646 Are you aware of any conversations he had with
1647 Dr. Alexander?

1648 A No, not aware of any conversations with Brian.

1649 Q And Mr. Caputo, are you aware of any
1650 conversations that he had with Secretary Azar?

1651 A No, not aware of any of those. I mean, I was
1652 not involved in any conversations that had happened, so I
1653 don't know what happened or how often or if.

1654 Q But you would expect the assistant secretary
1655 to have conversations with Secretary Azar, correct?

1656 A Say that again.

1657 Q Would you expect the assistant secretary of
1658 public affairs to have conversations with the Secretary in
1659 your 32 years?

1660 A Yes, yes, yes. Absolutely.

1661 Q But you're just not familiar personally with
1662 any conversations?

1663 A Correct.

1664 Q Let's go back to the documents here that we
1665 were just looking at. In the same paragraph that I was
1666 quoting from earlier, Dr. Alexander also writes, "We always
1667 knew as you relax and open up cases would rise."

1668 Are you familiar with any discussions or
1669 conversations in HHS around this time, June 2020, regarding
1670 relaxing mitigation measures?

1671 A I am not. And again, my focus as executive
1672 officer was making sure our staff was kept informed of what
1673 was going on in the office.

1674 Q Okay. So just when Dr. Alexander here says
1675 "We always knew," he's e-mailing just three individuals,
1676 how do you interpret that?

1677 A I think he is using the royal "we" and making
1678 assumptions.

1679 Q I'll direct you to the last paragraph here in
1680 this e-mail. You'll see that Dr. Alexander compares what
1681 appear to be death statistics between COVID-19 and seasonal
1682 influenza, which he says is much more lethal than COVID.

1683 Are you aware of any conversations within HHS
1684 regarding the lethality of the coronavirus as compared to
1685 the flu?

1686 A No, I am not.

1687 Q Do you recall any messaging out of HHS that
1688 compared the coronavirus lethality to the flu?

1689 A No, I do not recall any messaging out of HHS
1690 on that topic.

1691 [Exhibit 7 was identified
1692 for the record.]

1693 BY [MAJORITY COUNSEL].

1694 Q Okay. Let's go to the next exhibit, please,
1695 Exhibit 7. I will state for the record -- I will direct
1696 you to SSCC-0014301. And this is a May 19, 2020 e-mail
1697 from a CBS news reporter to Mr. Caputo. Subject line, "CBS
1698 Q: Drug ODs and suicides." And you'll see in the body of
1699 the e-mail that the CBS reporter asked for figures HHS has
1700 on overdose and suicide statistics.

1701 A little further up in the e-mail chain at
1702 SSCC-0014300, Mr. Caputo adds Dr. Alexander and Patrick
1703 Brennan to the chain, which you are also on, asking if they
1704 have any data to provide. And Mr. Brennan writes, "Paul
1705 was working on trying to model something like this, but
1706 trying to give them an actual number would probably create
1707 more questions than it would answer."

1708 So real quick stepping back, I don't believe you've
1709 mentioned before, who is Patrick Brennan and what was his
1710 role in HHS?

1711 A Patrick Brennan was the lead speechwriter.

1712 Q For the Secretary or for all --

1713 A Yes, for Secretary Azar.

1714 Q Okay. And what was his role with respect to
1715 the coronavirus?

1716 A So his role would be to write talking points
1717 or speeches for the secretary. Again, those would be

1718 drafted, shared across the department for review to ensure
1719 accuracy and the latest known information. So that would
1720 be why Patrick would be involved in crafting a message that
1721 way. So --

1722 Q Okay. I'll direct you to page SSCC-0014299.
1723 You'll see Dr. Alexander replies later on in this e-mail
1724 thread and he writes, "We modeled it, and opening now when
1725 we look month by month saves thousands of lives."

1726 Again, you are on this e-mail chain throughout. Are
1727 you aware of any coronavirus modeling done by
1728 Dr. Alexander?

1729 A I am not.

1730 Q Are you aware of any projections that he
1731 offered with respect to the coronavirus?

1732 A I'm not, no.

1733 Q Are you aware of any discussions in HHS around
1734 this time regarding projecting death statistics associated
1735 with mitigation measures?

1736 A I'm not.

1737 Q Let me briefly turn to actually Exhibit 8, if
1738 you don't mind.

1739 [Exhibit 8 was identified
1740 for the record.]

1741 BY [MAJORITY COUNSEL].

1742 Q The next document. And specifically page

1743 SSCC-0014387. So this is a May 16, 2020 e-mail from
1744 Patrick Brennan, who we just discussed, to Dr. Alexander
1745 and a Listserv named "ASPA deputies." Subject line,
1746 "Health versus health op-ed draft for review." So as the
1747 deputy assistant secretary, were you part of this ASPA
1748 deputies Listserv?

1749 A Yes, I was.

1750 Q So any reason to believe you did not receive
1751 this e-mail here?

1752 A I'm confident I received this e-mail.

1753 Q You'll see the next day in response to this
1754 e-mail at SSCC-0014385, Dr. Alexander replies, "I did my
1755 own modeling on suicides and my figure comes out at 300,000
1756 additional deaths due to despair."

1757 Do you have any reason to believe that this was the
1758 modeling Dr. Alexander referenced in the prior Exhibit 7?

1759 A I don't know.

1760 Q Did you ever discuss this modeling -- or are
1761 you aware of any discussions within HHS regarding this
1762 modeling?

1763 A No, I did not discuss, and nor was I aware of
1764 this modeling.

1765 Q Do you recall anyone in HHS or the Trump
1766 Administration more generally who wanted to use
1767 Dr. Alexander's projections?

1768 A No.

1769 Q Do you recall anyone in the Trump
1770 Administration raising concerns about Dr. Alexander's
1771 projections?

1772 A No.

1773 Q Okay. Let's flip back to Exhibit 7, if you
1774 will, page SSCC-0014298. You'll see here Alexander sends
1775 another e-mail on May 19, 2020 to that same group which you
1776 were on, and he writes in the second paragraph at the last
1777 sentence there, "And people seek to blame someone or anyone
1778 that makes their lives difficult, so we need to keep this
1779 in mind. So opening up to me now is key."

1780 Do you recall any discussions or conversations
1781 regarding blame for the coronavirus?

1782 A No.

1783 Q Do you recall anyone having -- expressing any
1784 concerns about the administration being blamed in any
1785 fashion for the coronavirus?

1786 A No.

1787 Q Any point -- strike that. Strike that.

1788 [Exhibit 9 was identified
1789 for the record.]

1790 BY [MAJORITY COUNSEL].

1791 Q Let's turn to Exhibit 9 here, please, and
1792 specifically page SSCC-0014090. And you'll see this is a

1793 May 28, 2020 e-mail from Brad Traverse to a long list of
1794 HHS officials, including you. I'll just note you're on the
1795 next page, if you're looking for your e-mail address.
1796 Subject line here is "ASPA greetings." The recipient list
1797 includes officials from CDC, CMS, NIH, FDA, and I believe
1798 other subunits of HHS.

1799 What's your understanding of why Mr. Traverse would
1800 e-mail this collection of individuals?

1801 A This is just -- this is clearly a way of Brad
1802 introducing himself to some of the senior leaders in the
1803 communication lanes of HHS.

1804 Q I know you mentioned before that ASPA
1805 is -- one of ASPA's roles is to do some air traffic
1806 controlling between subagencies on messaging.

1807 A Yep.

1808 Q Looking at this list here, are these the
1809 individuals that ASPA would primarily interface with with
1810 respect to coronavirus messaging?

1811 A So this is a letter of communications
1812 directors from across the department that I actually
1813 maintained on a regular basis. So, like, once a month
1814 somebody would come in, we'd add a name. Somebody would
1815 leave, we'd drop the name.

1816 So Brad has taken this list of individuals that we
1817 actually call our communications leaders list and sent out

1818 an e-mail. So that is what this clearly is.

1819 Q Got it. So these are folks who were involved
1820 in communications for their agency during the coronavirus?

1821 A That is correct.

1822 Q You'll see the -- in the second-to-last
1823 paragraph there Mr. Traverse references a few documents
1824 that he's attaching, one of which is a -- an op-ed by
1825 Secretary Azar.

1826 I'll direct you to that attachment. It's at
1827 SSCC-0014094, if you'd toggle there. And the op-ed is
1828 titled, "We have to reopen for our health, by Secretary
1829 Alex Azar," dated May 21, 2020 in the Washington Post. We
1830 have previously seen Mr. Brennan attach -- address op-ed on
1831 the health v health issue. Is it your understanding that
1832 Mr. Brennan was working on an op-ed for Secretary Azar
1833 regarding reopening?

1834 A Yes.

1835 Q Do you understand that this document here is
1836 the final version of the draft that Mr. Brennan was
1837 involved in working on?

1838 A It is pulled from The Washington Post, yes.

1839 Q Sure.

1840 A I'll go there. I don't have a specific memory
1841 of each edit, but --

1842 Q Sure.

1843 A -- nor was I involved in any edits.

1844 Q Sure. Do you recall -- you've identified
1845 Mr. Brennan. Do you recall anyone else who worked on this
1846 op-ed?

1847 A I do not. Just Patrick would have the lead as
1848 the lead writer, and Patrick would make sure the right
1849 individuals reviewed the content to make sure it was
1850 consistent with the latest science.

1851 Q So who at this time, May 21, 2020, in ASPA,
1852 who would be the right people who would review an op-ed by
1853 the Secretary?

1854 A I don't know who reviewed the op-ed. I do
1855 know in general it would include individuals from the
1856 immediate Office of the Secretary, the general counsel's
1857 office, general counsel reviews everything, and a counselor
1858 to the Secretary on the particular topic, as well as
1859 agency -- potentially agency heads or key leads within
1860 those agencies. But I don't know who they were that he
1861 would have coordinated with.

1862 Q Okay. Was the concept of health versus health
1863 a communications concept discussed in HHS around this time?

1864 A None of which I were involved in. And
1865 obviously, yes, it was published in The Washington Post.

1866 Q Are you aware of any discussions regarding the
1867 health versus health concept?

1868 A No, just more of the we got the Secretary's
1869 op-ed published in The Washington Post and establishing a
1870 framework for conversations.

1871 Q You're not aware of any discussions regarding
1872 how to characterize the relative risks of the coronavirus
1873 to mitigation measures?

1874 A No.

1875 Q Okay. Do you recall any events that prompted
1876 Secretary Azar and his team to draft this op-ed?

1877 A I do not.

1878 Q Do you recall anyone expressing any statements
1879 regarding who asked for this op-ed to be --

1880 A I do -- I do not.

1881 Q Are you aware of any CDC official or other
1882 government experts who reviewed the public health
1883 assertions in this op-ed?

1884 A I do not know who.

1885 Q Are you aware of any concerns raised by anyone
1886 at HHS regarding anything stated in this op-ed?

1887 A No, I am not.

1888 Q Okay. Looking back just to the e-mail from
1889 Mr. Traverse that attaches these documents, he notes in the
1890 first paragraph there, the last sentence, that, "It's our
1891 hope that greater coordination will be manifested and that
1892 we can move into a proactive, rather than a reactive,

1893 messaging mode."

1894 So what's your understanding of what a proactive
1895 messaging mode was being pursued at this time?

1896 A I don't know what Brad was thinking as he
1897 wrote that.

1898 Q Are you aware of any conversations in HHS
1899 regarding being proactive on messaging at this time?

1900 A No.

1901 Q Are you aware of any messages in HHS that
1902 individuals stated were reactive messages?

1903 A No. No.

1904 Q Are you aware of any concerns or criticisms
1905 regarding HHS's coronavirus messaging around this time?

1906 A No.

1907 [Exhibit 10 was identified
1908 for the record.]

1909 BY [MAJORITY COUNSEL].

1910 Q Let's go to Exhibit 10, please. And while
1911 you're flipping there, I will say this is a June 15, 2020
1912 e-mail, again from Dr. Alexander to you and other ASPA
1913 officials. Subject line: "Thoughts on the reopening for
1914 the Secretary/White House."

1915 And I will direct you to bullet 2 where Dr. Alexander
1916 writes, "The population will go to polls in November and
1917 make decisions and vote based on common sense. This will

1918 come down to a common sense election."

1919 We asked before how -- whether it was common to
1920 discuss campaigns in HHS around this time. How common was
1921 the November election discussed in HHS around this time, to
1922 your knowledge?

1923 A I was not part of any conversations around it.

1924 Q Did you receive other e-mails, to your
1925 recollection, that regarded the November 2020 election in
1926 the context of the coronavirus?

1927 A No.

1928 Q Do you have any understanding of why
1929 Dr. Alexander was discussing the election in the context of
1930 the reopening here?

1931 A I don't know what Dr. Alexander was thinking.

1932 Q Did you have any concerns about framing the
1933 reopening in the context of the November 2020 election?

1934 A So I would express concerns, but again, this
1935 is not anything I was tasked with working on at this point
1936 in time.

1937 Q So in your position at HHS, being at least
1938 copied on a number of these e-mails regarding reopening,
1939 regarding testing, regarding herd immunity, did you ever
1940 have conversations with anyone about whether the
1941 administration was pursuing policy or messaging that was
1942 not supported by the science at the time?

1943 A I did not.

1944 Q Do you recall anyone expressing concerns about
1945 the administration pursuing policies or messaging that were
1946 not supported by the science at the time?

1947 A No.

1948 Q Direct you to bullet 5 here. Dr. Alexander
1949 writes, "Messaging" -- pardon me. Strike that.

1950 In bullet 5 Dr. Alexander writes, "Messaging for
1951 COVID by the administration and leaders has to now involve
1952 a paradigm shift where responsibility should shift from the
1953 state to the individual."

1954 Are you aware of any discussions in HHS about
1955 shifting responsibility for containing coronavirus to
1956 individuals?

1957 A I am not.

1958 Q Are you aware of any messaging proposals that
1959 focused on an individual responsibility for containing the
1960 coronavirus?

1961 A I am not.

1962 Q Any messaging materials that even referenced
1963 individual responsibility for containing the coronavirus?

1964 A No.

1965 Q Are you aware of any consideration -- steps or
1966 actions in HHS that were considered to effectuate a policy
1967 shift for containing the coronavirus at any time?

1968 A No.

1969 [Exhibit 11 was identified

1970 for the record.]

1971 BY [MAJORITY COUNSEL].

1972 Q Okay. Let me direct you to Exhibit 11,

1973 please.

1974 A I don't think I have an 11.

1975 Q Yeah, please take a look.

1976 A Now I do. Got it.

1977 Q This is a July 12, 2020 e-mail from

1978 Dr. Alexander to you, other ASPA officials, and John Wolf

1979 Wagner who has an FDA e-mail address there. Subject line:

1980 "Key messages needed now."

1981 Are you familiar with John Wolf Wagner?

1982 A Yes, I met Wolf a number of times.

1983 Q And what was his position at FDA around this

1984 time?

1985 A He was the director of communications.

1986 Q And what was his role in the coronavirus

1987 response as you understood it?

1988 A Being a point person for FDA messaging around

1989 whatever FDA was going to be approving or not approving or

1990 moving forward with coronavirus activities. And again, in

1991 that communications role, his responsibility would be to

1992 raise to the assistant secretary for public affairs key

1993 major announcements.

1994 Q Okay. So would he be one of the point people
1995 that ASPA would communicate with in coordinating
1996 coronavirus messaging?

1997 A Yes.

1998 Q And did you in fact coordinate with him on
1999 coronavirus messaging -- strike that. Strike that.

2000 A I did not, yeah.

2001 Q Did ASPA in fact coordinate with him on
2002 coronavirus messaging?

2003 A So I don't know. Again, wouldn't be in my
2004 purview to have done that. I would imagine so. It would
2005 make sense.

2006 Q Sure. Let me take actually a broader step
2007 back here. Are you aware of any other political appointees
2008 in FDA working on the coronavirus in 2020?

2009 A Really not coming up with any names off the
2010 top of my head here. But, you know, definitely Wolf
2011 Wagner.

2012 Q Okay. What about in the CDC? Were there any
2013 political appointees that you were aware of working on the
2014 coronavirus in 2020?

2015 A So yes. Nina Witkofsky would be a key point.

2016 Q Are there any others?

2017 A Not that I'm -- not that I can think of right

2018 now.

2019 Q Okay. Let's go back to Exhibit 11 here. Do
2020 you recall anything about the circumstances of Mr. Wagner's
2021 hiring?

2022 A I do not.

2023 Q Do you have any indication of whose decision
2024 it was to hire Mr. Wagner?

2025 A I do not know?

2026 Q Formally, given your experience and role at
2027 HHS, who would have the authority to hire Mr. Wagner for
2028 that position?

2029 A The PPO and coordinate it through the
2030 White House liaison's office. And PPO being Presidential
2031 Personnel Office, just --

2032 Q Sure. Do you recall anyone ever expressing
2033 concerns about Mr. Wagner's hiring or his role at FDA?

2034 A No.

2035 Q Do you have any understanding of why
2036 Dr. Alexander would include Mr. Wagner on an e-mail
2037 otherwise exclusively sent to ASPA officials?

2038 A I don't know what he was thinking.

2039 Q To your knowledge, was anyone in HHS ever
2040 instructed to include Mr. Wagner on e-mails?

2041 A Not that I'm aware of.

2042 Q Okay. Are you familiar with any specific

2043 coronavirus initiatives that Mr. Wagner worked on?

2044 A I am not.

2045 Q What about the emergency use authorization
2046 messaging regarding convalescent plasma. Does that refresh
2047 your recollection at all?

2048 A No. I don't know what his involvement was or
2049 if he had any involvement.

2050 Q And did you have any involvement in the
2051 emergency use authorization messaging for convalescent
2052 plasma?

2053 A I did not.

2054 Q Are you aware of anyone in HHS who was
2055 involved in that messaging?

2056 A I don't know.

2057 Q Are you aware of anyone --

2058 A Consistent with practice, that announcement
2059 would be coordinated through ASPA, ultimately through the
2060 Secretary and then the White House.

2061 Q Okay. Would that -- would FDA -- which
2062 bucket -- going back to the different deputy assistants and
2063 their different lanes, as you've described it, who had FDA
2064 under their purview?

2065 A So that would be Bill Hall.

2066 Q Do you recall anyone ever expressing any
2067 concerns about messaging in regards to convalescent plasma?

2068 A I do not.

2069 Q Do you recall just having any discussions
2070 regarding convalescent plasma messaging?

2071 A I do not. Again, sorry for saying it over,
2072 not my lane, and nor was I directed to be engaged in any of
2073 this at this point. So --

2074 Q Sure. Just give me one second, please,
2075 Mr. Weber. Let me go on mute.

2076 A Sure.

2077 [Majority Counsel]. I think I have just a few more
2078 questions here. [Redacted], do we know when the next hour
2079 is up? I've lost track of time.

2080 [Majority Counsel]. I think you have about another
2081 30 minutes, 25 minutes, maybe.

2082 Mr. Barstow. We started at 10 --

2083 [Majority Counsel]. Oh, apologize. Yeah, I was on
2084 mute. We have 20 minutes.

2085 [Majority Counsel]. Twenty minutes. Okay. Great.
2086 I think we'll wrap up a little portion here, then I think
2087 we'll continue on. We're going to use the full 20.

2088 BY [MAJORITY COUNSEL].

2089 Q Mr. Weber, in your tenure at HHS during the
2090 period in question, are you aware of anyone ever attempting
2091 to limit a government official's ability to speak publicly
2092 about the coronavirus?

2093 A I am not.

2094 Q Are you aware of anyone taking a retaliatory
2095 action against any government employee during the period in
2096 question?

2097 A I am not.

2098 Q Are you aware of anyone attempting to alter or
2099 delay scientific reports or scientific messaging regarding
2100 the coronavirus?

2101 A I am not aware of that happening.

2102 Q And are you aware of any attempts by any
2103 officials to delete or conceal evidence or indications of
2104 political interference?

2105 A I am not.

2106 Q Okay. I think we will shift gears a little
2107 here to a subject that you referenced at the outset of the
2108 interview. It's been called at least in the media the
2109 defeat despair campaign. For reference, I'll do my best to
2110 refer to it today as the public relations or the PR
2111 campaign, if that works with you.

2112 Just to confirm for the record, are you generally
2113 familiar with the campaign I'm referring to here?

2114 A I am very familiar with the campaign you're
2115 referring to. I may be the person who knows the most about
2116 it.

2117 Q Great. Great. Well --

2118 A So -- and you will see a lot of responsive
2119 e-mails from me at that point.

2120 [Exhibit 12 was identified
2121 for the record.]

2122 BY [MAJORITY COUNSEL].

2123 Q Great. Well, we're happy to have you here to
2124 discuss this. So I think just for purposes of clarity for
2125 today, I'm going to introduce Exhibit 12. And I'll direct
2126 you to take a look at that. This is a November 13, 2020
2127 letter from then Assistant Secretary for Legislation Sarah
2128 Arbes to Chairman Krishnamoorthi.

2129 And I will direct you to page 2 where it describes
2130 two separate prime contracts that were used for this
2131 campaign, one of which is an Immediate Surge contract
2132 awarded by FDA to Atlas Research on August 26, 2020, for a
2133 little more than \$15 million, and a Short Term contract
2134 awarded by the NIH to the Fors Marsh Group on August 31,
2135 2020 for a little bit more than \$251 million.

2136 Is this consistent with your understanding?

2137 A Yes.

2138 Q Okay. Great. Can you just briefly describe
2139 the background of this campaign and your involvement in it?

2140 A So I was brought in to help conceive a public
2141 education campaign late June of 2020. And as I mentioned
2142 earlier, there was a letter in response to Senator Daines

2143 and a bipartisan group of members, Congress, who called for
2144 such an effort. And the letter that was drafted and used
2145 to respond, I was asked to review and comment before it was
2146 sent. So that was really my initial foray into the
2147 conceptualization of a campaign.

2148 Q Sure. Let me just stop you there real quick.
2149 Who brought you into the campaign?

2150 A Michael Caputo.

2151 Q Okay. At this time in June 2020, did
2152 Mr. Caputo bring anyone else into the campaign?

2153 A Not that I'm aware of. I mean, it
2154 just -- really he asked me to review the letter and I
2155 provided my comments and that was that at that point in
2156 time.

2157 Q At that point in time. Sure. Can you
2158 discuss, as the campaign progressed after June into July
2159 and August, who else was involved in the campaign?

2160 A So it really was, you know, from inside of
2161 government, Michael Caputo and myself. Some conversations
2162 with Michael Pratt, but it was Michael Caputo and myself.
2163 And as things evolved, obviously, it got bigger, but at
2164 this point in time it was Michael Caputo and myself.

2165 Q Okay. And you said that was inside of
2166 government. Were there individuals outside of government
2167 who were involved?

2168 A Not that I'm aware of.

2169 Q There were no outside advisors, volunteers,
2170 interest groups, anything like that who were involved
2171 around this time?

2172 A Not at this point.

2173 Q At a later point folks got involved in the
2174 campaign, correct?

2175 A Absolutely. I'll say as I was a one-man band
2176 there for a little while, I knew that wasn't going to last
2177 too long, so --

2178 Q Sure. You mentioned a couple of individuals
2179 within government who were involved. Do you know on what
2180 basis they were selected to participate in the campaign by
2181 Mr. Caputo?

2182 A So Michael Pratt being primary, he was a
2183 political appointee for strategic communications, and he
2184 was supporting Michael also in terms of developing the
2185 strategy or the approach around the campaign.

2186 Q Can you go a bit more into your role and your
2187 involvement in the campaign?

2188 A So a way to do this, I think, that would help
2189 keep it in line or, you know, it's like there's sort of a
2190 sequencing time-wise. But again, your show, so I'll answer
2191 the question as you asked.

2192 But the initial foray, like I said, in response to

2193 the Senator Daines letter, late June, probably even could
2194 be, like, June 30 or so, the Office of the Assistant
2195 Secretary for Financial Resources reached out to me and
2196 they explained to me that there was a process going on to
2197 apportion money to ASPA to run a public education campaign,
2198 and that there was a need for a proposal to go from ASFR to
2199 OMB so that the apportionment could be executed. They
2200 asked me to draft it.

2201 I was aware at the time that Michael Pratt and
2202 Michael Caputo had been discussing the concept of a
2203 campaign with the White House, and they had a -- again,
2204 it's a one-page document that outlined sort of the goals of
2205 the effort. And so I asked -- at that point in time, I
2206 asked for a copy of that document.

2207 Q Just real quick, I want to --

2208 A Sure.

2209 Q What is roughly the period of time you're
2210 talking about right now?

2211 A This is maybe June 30 through July 9.

2212 Q Okay.

2213 A Certain days that stick in my head for life.
2214 But anyway, so --

2215 Q Do you recall the document you're referencing,
2216 was it titled anything or any identifying --

2217 A You know, I don't remember. I just remember

2218 it outlined the concept of what a campaign -- the goals of
2219 the campaign. And I also know that when you're writing a
2220 memo to OMB about apportionment of funds, it needs to be
2221 consistent with the concept that was presented.

2222 So I knew this one-page document -- and again, it's
2223 bullets, it's not like a text -- was the concept that was
2224 presented to the White House, and I understood that to get
2225 this memo done, I needed to make sure the concept was
2226 consistent.

2227 But in addition to that concept, I was asked to
2228 ballpark what it might cost to run a major national
2229 campaign of such a -- with such intensity because an
2230 objective was ultimately behavior change.

2231 So I went to the two campaigns that I knew very well,
2232 one being the CDC Tips campaign and looked at the work that
2233 was done there to help people who smoke stop smoking.
2234 That's a very intense behavior that communications is
2235 capable of impacting. The other campaign that I looked at
2236 was the FDA Real Cost campaign, which again is about
2237 preventing young people from starting to smoke in the first
2238 place.

2239 So these are two very intense, resource-intense,
2240 well-evaluated campaigns that were sort of similar in
2241 scope. And so in this proposal that I put together, again,
2242 I will be candid, the ballpark I was given was \$300

2243 million. And based on my -- my analysis of Tips and Real
2244 Cost, we could probably do this for \$300 million. As well
2245 as --

2246 Q Oh, sorry, just real quick --

2247 A Sure.

2248 Q -- that was the ballpark that you were given.
2249 Who gave you that ballpark?

2250 A By Michael Caputo. By Michael Caputo and the
2251 Office of the Assistant Secretary for Financial Resources.
2252 So they were looking in the ballpark of \$300 million. In
2253 my professional opinion, is this something that would be
2254 able to accomplish the goal?

2255 I did my research. Again, familiar with these
2256 campaigns because I had worked with -- I worked with all
2257 the agencies across HHS on all the campaigns that would
2258 come out of this place. And again, the size and scope and
2259 significance and the behavior change we were going after, I
2260 thought it was a credible estimate, put together the
2261 proposal, talked about --

2262 Q Again, sorry to interrupt you, but there's a
2263 lot of sequencing, so this is really helpful.

2264 So Mr. Caputo and another individual in the Financial
2265 Resources Office told you that there was -- that they were
2266 considering a \$300 million expenditure for the campaign.
2267 Subsequent to that, you did research into what it might

2268 cost to effectively run a campaign; is that the process --

2269 A Yeah, absolutely. Would \$300 million get the
2270 job done.

2271 Q Okay.

2272 A Or could \$300 million get the job done. I
2273 mean, that -- you know, many things go into that. Just a
2274 chunk of cash is not nearly enough.

2275 Q Sure. Real quick, are you familiar with who
2276 in the Financial Resources Office you were speaking with
2277 about this?

2278 A I -- it was our normal liaison. So again,
2279 depending on where money's coming from, if you will, we
2280 have, like, general management funds, we have services
2281 applied fund, et cetera. So -- and there was the -- a
2282 COVID fund -- a couple of COVID funds. And the individual
2283 who -- the career staff individual who was managing that,
2284 just sort of the nuts and bolts, is the person who
2285 initially called me. Her name is Jennifer Stacy.

2286 Q Got it. Okay. Do you have any understanding
2287 of where the \$300 million proposal came from? What that
2288 basis was?

2289 A What was given to me as the ballpark?

2290 Q Correct.

2291 A I don't know. That I don't know. I
2292 just -- by -- it was -- my opinion was being sought on do

2293 you think for this amount we could have the impact that was
2294 desired. And I looked at other campaigns of magnitude that
2295 we were talking about and came up with a proposal that, you
2296 know, it was like -- it was my opinion that we could do it.
2297 We can do this. Bad pun.

2298 Q Sure. And I'm sorry to jump in there. I
2299 think you were --

2300 A That's okay.

2301 Q -- saying what happened subsequent to your
2302 target research of other campaigns. I'd love to have you
2303 continue more about your involvement.

2304 A Yeah. So again, put together a
2305 page-and-a-half proposal. Talked about, again, the goals
2306 that had been -- the concept that had been put forward to
2307 the White House. Talked about the importance of using
2308 market research to define messaging, the importance of
2309 evaluation, the importance of using communication science.
2310 Because there is a science to it. That is how you prevent
2311 kids from smoking. That is how you get people who smoke to
2312 stop. And with the understanding that communications alone
2313 can only accomplish so much. I mean, it's -- there's a
2314 range. And put in there a ballpark estimate of needing
2315 probably ten people to get this up and running.

2316 And so the proposal was submitted back to ASFR,
2317 Financial Resources Office, early July -- you know, somehow

2318 I'm remembering a July 4 holiday working on this. And the
2319 proposal was accepted by OMB, and the way I know it was
2320 accepted by OMB is an apportionment of funds was made to
2321 ASPA in a total of \$300 million on or around July 9th. So
2322 July 9th, as I say, the money was put into the ASPA bank
2323 account.

2324 Q Okay. And you're mentioning other campaigns
2325 that you worked on, the CDC, the antismoking campaign. How
2326 would you compare this allotment of funds for the
2327 coronavirus campaign as compared to these other major
2328 campaigns that you researched?

2329 A Again, very consistent. I mean, that
2330 is -- the question I was asked, "Can we do this for \$300
2331 million?" And based on my research, looking at those two
2332 other major campaigns that were invested in behavior
2333 change, it seemed to me that that was a good ballpark
2334 estimate. So --

2335 Q Okay. I think you mentioned a little bit
2336 before that there was a document with bullets about the
2337 goals of the campaign we briefly discussed.

2338 A Yep.

2339 Q Do you recall what some of the goals listed on
2340 that document were?

2341 A I can look that up. So the goals -- and I'll
2342 lead you into this. These goals are consistent through the

2343 statement of work. But number one, "Provide critically
2344 important public health and other information that will be
2345 relevant across the country throughout the process of
2346 reopening. Defeat despair and inspire hope. Sharing best
2347 practices for businesses to operate the new normal and
2348 instill confidence to return to work and restart the
2349 economy. Give Americans the information they need to know
2350 as their cities and communities move through each of the
2351 phases of reopening. Reach communities across the nation
2352 by building coalitions as spokespeople who will resonate
2353 with various audiences."

2354 So that was -- almost those exact words were from
2355 that one-page document that was used in terms of the
2356 concept that was pitched to the White House. That is
2357 lifted, that language, to write the proposal to OMB, again,
2358 a consistent thread and then -- a couple more steps here.
2359 But when you look at the statements of work, you will see
2360 almost that exact same language in terms of a -- and this
2361 is very important, preamble to a statement of work. So,
2362 you know, linking through that.

2363 So back again to July 9, the money was
2364 allocated -- or apportioned to ASPA and the -- there was a
2365 desire to get messaging out as quickly as possible. I
2366 mean, and -- which makes absolute sense given the nation
2367 was in a public health emergency, to use a term of art, but

2368 it was a public health emergency and there was clearly a
2369 need for a national presence in terms of educating the
2370 public.

2371 So this is -- this is the task that I accepted and
2372 began to move forward in terms of executing.

2373 Q Sure. I know we're getting close to time
2374 here. Just before we wrap, just a couple other questions
2375 on this note.

2376 The goals document, I think you said this already,
2377 but just to confirm --

2378 A Sure.

2379 Q -- that was drafted by Mr. Caputo, to your
2380 knowledge?

2381 A I don't specifically know who drafted it, but
2382 I am -- I will say that Michael Caputo and Michael Pratt
2383 used it in terms of their conversations with the
2384 White House.

2385 Q Great. And they're the ones who gave you the
2386 document to draft --

2387 A That's correct. That's correct.

2388 Q Did you ever have any conversations with
2389 Mr. Caputo about who he discussed the content of the goals
2390 document with?

2391 A So I do not know who he talked to about that.
2392 The one person who was constantly interested in progress

2393 was Larry Kudlow. So that is the only name of anyone from
2394 the White House that I was aware of, because, you know, he
2395 would call Michael Caputo to see where we were with the
2396 campaign.

2397 Q Sure. How would you describe Mr. Kudlow's
2398 involvement in the campaign?

2399 A So I never talked with him. He only spoke
2400 with Michael Caputo and Mr. Caputo would come and visit me
2401 every time Larry Kudlow would call.

2402 Q How frequently was that?

2403 A I will say initially, like, every week. It
2404 was -- and -- you know, and I don't mean to make light.
2405 Again, the nation was in -- it was a public health
2406 emergency. There was a clear need for the government to be
2407 communicating with the public in a much broader coordinated
2408 way.

2409 These taxpayer resources were now -- and I look at it
2410 this way -- entrusted to ASPA to make sure it was done in
2411 an effective science-based way and in a whole-of-HHS
2412 approach, which we'll talk a little bit more about later, I
2413 imagine.

2414 Q Sure. And did Mr. Caputo ever relay any
2415 specific statements or thoughts from Mr. Kudlow with
2416 respect to the campaign?

2417 A No. Just when is it going? When is it

2418 launching? When are we going to see ads?

2419 Q So Mr. Kudlow's primary focus was timing?

2420 A Yes.

2421 Q Did he ever convey any specific to

2422 Mr. Caputo -- strike that.

2423 Did Mr. Caputo ever relay to you Mr. Kudlow's

2424 preferred timing for the campaign?

2425 A Everybody at that point in time wanted it now

2426 and --

2427 Q And --

2428 A -- and it just doesn't work that way.

2429 Q Sure. Sure.

2430 A I will add that HHS, the career staff here,
2431 did a heroic effort in making this happen in an incredible
2432 amount -- a quick amount of time, consistent with legal
2433 requirements, contracting, et cetera. Again, happy to talk
2434 further about that when we get there.

2435 Q And this one last one, Mr. Weber, if you
2436 indulge me and then we can, I think, take a break here.

2437 You had mentioned that one of the goals of the
2438 campaign -- or the focus of the campaign was to enact a
2439 behavior shift, is that right, or to change behavior?

2440 A Yeah. Mm-hmm.

2441 Q What behavior was the administration hoping to
2442 change?

2443 A So the key construct is around vaccine
2444 hesitancy. And at that point in time, again, remember, we
2445 didn't have a vaccine. We just had promises, something's
2446 coming. And at that point in time, there -- I was -- it
2447 was suggested that the vaccine might only be 50 percent
2448 effective. And I really recall, it was like how do we
2449 execute a campaign where a vaccine's only 50 percent
2450 effective? That is going to be a huge challenge.

2451 And, you know, fortunately our scientists delivered
2452 something much more effective, which ultimately made the
2453 campaign challenge less difficult. It was still incredibly
2454 difficult, but that was the primary focus, like, addressing
2455 vaccine hesitancy once we got to that point. But
2456 immediately around the social distancing, reinforcing the
2457 importance of wearing masks and doing things to mitigate
2458 the consequences of COVID.

2459 [Majority Counsel]. Right. Well, I think we
2460 are -- we're at time here to take our next break. So
2461 unless anyone has anything else to add.

2462 [No response.]

2463 [Majority Counsel]. Great. Okay. We'll go off the
2464 record and take a five-minute break. Thanks.

2465 [Recess.]

2466 [Majority Counsel]. [Redacted], we'll turn it over to
2467 your team.

2468 [Minority Counsel]. Thank you.

2469 BY [MINORITY COUNSEL].

2470 Q So you had said previously that you didn't
2471 read every e-mail Dr. Alexander sent you. Did you read any
2472 of the e-mails Dr. Alexander sent?

2473 A I really didn't. I mean, it was -- there were
2474 a lot of them. I wasn't sitting around looking for stuff
2475 to do around here. And knowing that Dr. Alexander was
2476 working in a different lane than my purview, no, I really
2477 didn't pay much attention.

2478 And so, you know, to -- the importance here is
2479 prioritizing my workday, and I know what tasks I was
2480 assigned, and Dr. Alexander was not a task that I was
2481 assigned.

2482 Q You were never assigned anything from anyone
2483 pursuant to a Dr. Alexander e-mail?

2484 A No, not whatsoever. Again, my --

2485 Q Did you ever --

2486 A I'll -- just I'll add my responsibility was
2487 bringing him on board.

2488 Q So no, like, messaging of health tasks,
2489 just --

2490 A No. No. None whatsoever.

2491 Q Did you ever respond to an e-mail from
2492 Dr. Alexander?

2493 A Not that I remember. Yeah, I was like, oh,
2494 this is up to somebody else to respond to this one.

2495 Q Fair enough. I want to move to the campaign
2496 that Majority counsel was talking about. Did you work on
2497 other ad campaigns like this before, kind of like "we need
2498 to change minds" ad campaigns?

2499 A Absolutely. One of my proud point moments of
2500 many campaigns I've worked on here and -- was responsible
2501 for just overseeing the review and coordination of all
2502 campaigns out of HHS. So a pretty good -- I had a pretty
2503 good comprehensive knowledge of what was going on at HHS
2504 and how they operate.

2505 Q Are they -- are campaigns like this pretty
2506 common? Like I understand some are bigger than others.
2507 \$300 million sounds like a lot of money, but are messaging
2508 campaigns relatively common?

2509 A Yes. And one of the things that I worked on
2510 while I was here in ASPA was focusing on impact versus
2511 process. Campaigns can be incredibly effective when you
2512 narrow your focus, target an audience and report the
2513 impact. And sometimes people who are not communications
2514 professionals just sort of thing you put out an ad and the
2515 world will be a better place. So an incredible amount of
2516 work over the last ten years of focusing our campaign work
2517 on impact versus process.

2518 Q So it's more -- I was going to try to reword
2519 that -- it's more you want --

2520 A Sure.

2521 Q -- you want quality over quantity in your
2522 campaigns, right?

2523 A Absolutely. Absolutely.

2524 Q So in the other campaigns you worked on, was
2525 it common to have kind of a whole-of-government
2526 coordination or at least a whole-of-HHS coordination?

2527 A So always HHS -- always ASPA coordination, you
2528 know. And the extent of ASPA's involvement depended on the
2529 campaign. So, you know, if it was something very
2530 specialized or localized, probably not a lot of ASPA
2531 involvement.

2532 If it's something that involved multiple agencies and
2533 that was a high priority for whatever administration,
2534 probably a lot of ASPA involvement. And so it just, again,
2535 depends on the campaign and what the topic was.

2536 Q So some of those also included White House
2537 involvement. Having the White House involved in a major
2538 campaign across agencies wouldn't have been rare?

2539 A That is correct.

2540 Q You also said that people came to you and they
2541 wanted this campaign now.

2542 A Mm-hmm.

2543 Q And that the campaign was to -- primarily at
2544 that point to inform the public on mitigation efforts
2545 around coronavirus; is that correct?

2546 A Absolutely.

2547 Q Was that important to do immediately?

2548 A Absolutely. There was a clear need. There
2549 was a lack of comprehensive messaging and -- you know. And
2550 this is one of those things, there's a balance between
2551 speed and quality and cheap or expensive, whatever that
2552 little meme is. But anyway, there was definite need.

2553 I will put out there the Ad Council was the one major
2554 national player out there that was beginning to formulate
2555 some messaging. And so, you know, a clear role for the
2556 government in terms of messaging.

2557 Q So the urgency you were feeling was not
2558 misplaced?

2559 A Not at all. Not at all.

2560 [Minority Counsel]. Okay. Thank you. That's all
2561 the questions we have.

2562 [Majority Counsel]. Great. Any other questions from
2563 your side, [Redacted]?

2564 [Minority Counsel]. No.

2565 [Majority Counsel]. Okay. Mr. Weber, we can
2566 certainly take a five-minute break, or if you'd like to
2567 continue, I think we're in a position to do so.

2568 The Witness. Let's keep going.

2569 BY [MAJORITY COUNSEL].

2570 Q Okay. Great. So when we were speaking last,
2571 we were discussing the funding that was used for the PR
2572 campaign. I think you mentioned that OMB was involved in
2573 the approval process for that funding.

2574 Who did you interface with at OMB regarding this
2575 request?

2576 A I did not interface with anyone at OMB. It
2577 was -- all of my work was done through our Office of the
2578 Assistant Secretary for Financial Resources.

2579 Q Okay. So are you aware of anyone else in the
2580 White House who was involved in the decision to move this
2581 funding over?

2582 A No, I do not know who was involved.

2583 Q Are you aware of what -- let me strike that.
2584 Are you aware of where the funding came from?

2585 A Yes. The CDC resources. It was a transfer of
2586 funds from CDC to ASPA. And that was done through an
2587 interagency agreement.

2588 Q Are you familiar with the interagency
2589 agreement?

2590 A I believe I signed it. So yes. And the chief
2591 of staff at CDC was also a signature.

2592 Q Do you recall who that was at the time?

2593 A I believe it was Sherri Berger.

2594 Q Did you have any discussions with anyone at
2595 CDC regarding this funding request?

2596 A No.

2597 Q Did you have any discussions with Sherri
2598 Berger about the funding request?

2599 A No, other than to execute the decision.

2600 Q Are you aware of any discussions with anyone
2601 at ASPA with the CDC regarding this request?

2602 A No, I am not.

2603 Q Are you familiar with any concerns raised or
2604 statements made by CDC officials with respect to this
2605 funding request?

2606 A So we're still in this timeframe here of,
2607 like, up to July 9th?

2608 Q Yes.

2609 A Okay. So the answer to that is no.

2610 Q I think you had mentioned that Mr. Kudlow was
2611 interested in the campaign. Are you aware of any other
2612 White House official who was monitoring the PR campaign?

2613 A I do not. I do not know.

2614 Q Are you aware of any communications or
2615 statements regarding the campaign that were made to or
2616 received from any political campaign officials?

2617 A No.

2618 Q I think we've established this, but just for
2619 the record, is it fair to say that Mr. Caputo oversaw the
2620 PR campaign?

2621 A Yes. I mean, he -- he had a concept, a
2622 tactical approach that he envisioned for the campaign work,
2623 and that was using celebrities to reach audiences that
2624 those celebrities had resonance with. So that was his
2625 vision of how this campaign was going to operate.

2626 Q Okay. Did he ever convey to you specific
2627 audiences that he was targeting?

2628 A No.

2629 Q But when you were working on a campaign, you
2630 can target specific audiences?

2631 A Absolutely. That's how you make a campaign
2632 effective.

2633 Q But those were not based on conversations you
2634 ever had with Mr. Caputo?

2635 A No.

2636 Q Do you recall --

2637 A So again, we're keeping -- you know -- and
2638 there's not a lot beyond that, but we're keeping -- I'm
2639 still at my July 9th/early July time frame here.

2640 Q Sure.

2641 A And the concept was, again, using celebrities.

2642 Q Sure. I just have one more question in this

2643 time frame and then make we can progress.

2644 A Okay.

2645 Q I know you discussed the time frame in which
2646 the funding request was discussed. Do you recall when
2647 Mr. Caputo first began talking about the concept of
2648 defeating despair?

2649 A You know, it probably -- for my -- I don't
2650 know when he first started talking about it, but he first
2651 talked about it with me, again, late June when the Senator
2652 Daines letter was responded to, when I asked for the
2653 concept that was shopped around at the White House. And so
2654 that's where I became involved with that part of the goals.

2655 Q Are you familiar with any conversations
2656 involving Mr. Caputo regarding any PR campaign prior to
2657 that while he was at HHS?

2658 A No.

2659 Q Okay. Well, perhaps we can move past the time
2660 frame we've been discussing here. During a September 16,
2661 2020 Senate hearing, Director Redfield testified and he
2662 stated that the CDC up to that point had not been involved
2663 other than given a directive from HHS and OMB to transfer
2664 funds; is that correct?

2665 A So again, I'll go back to I wasn't involved in
2666 the transfer of funds or how that happened. I just
2667 was -- I put together a proposal for how to execute.

2668 And literally the first phone call I made when the
2669 dollars were allocated to ASPA, we're talking early June,
2670 possibly June 9, I called the communications team at CDC
2671 and I said, look, this has been assigned to ASPA. I'm
2672 going to work on it. The first thing I'm going to need is
2673 some help and I need staff. We're going to have to make
2674 sure that CDC is engaged and has a role in this as well as
2675 every other equity across HHS.

2676 And for my entire career here at HHS, I've worked
2677 with the communications team at CDC, you know, cosponsored
2678 national conferences with them. And so very intimately
2679 involved with that team, have worked with them. And my
2680 first phone call was the head of communications at CDC.

2681 And with the understanding of how you expend the
2682 funds in the government, you either need a grant or a
2683 contract. We don't get checkbooks with large cash amounts.
2684 I talked to them about how I was going to -- you know, some
2685 initial plans for either doing a grant, doing a contract,
2686 explored some options.

2687 And CDC -- I will say the statement of work that you
2688 see with a preamble on it is a CDC statement of work for
2689 Zika public communications. CDC, in my consultation, I
2690 said, look, Zika's a lot like -- you know, not the same,
2691 but a lot like in the regional nature of the disease or the
2692 infection, and let me -- so they sent me the statement of

2693 work they used.

2694 And I took that statement of work and I modified it
2695 slightly for the times in terms of COVID and proceeded to
2696 try to figure out how -- what would be the best path
2697 forward for allocating resources through contracting
2698 mechanisms as well as the urgent need for messaging.

2699 So the first phone call was CDC communications
2700 professionals who provided me the statement of work that
2701 was used to develop the large 250 million as well as
2702 a -- I'll call it a barebones -- the 15 million through
2703 FMG.

2704 Mr. Barstow. [Redacted], can we just clarify
2705 something for the record? I think Mr. Weber said he spoke
2706 to CDC in early June, but I think he might mean early July
2707 based on the timeline.

2708 The Witness. Yes, correct. Sorry.

2709 [Majority Counsel]. Early July. Okay. Thanks,
2710 Kevin.

2711 BY [MAJORITY COUNSEL].

2712 Q Great. So just circling back on a couple of
2713 those points --

2714 A Sure.

2715 Q -- and Kevin might have clarified it
2716 there -- you said your first call was to the CDC's head of
2717 communications?

2718 A Yes.

2719 Q And to confirm, this was in early July?

2720 A That is correct.

2721 Q Okay. And who did you speak to at CDC? Who
2722 was the head of communications?

2723 A Kate Galatas. She was the acting
2724 communications director at the time.

2725 Q And what did you discuss with Ms. Galatas on
2726 the call?

2727 A Just the fact that the allocation of resources
2728 had been made to ASPA, that this is a vital national
2729 effort, that it would not be successful without CDC's
2730 involvement and engagement and being part of it, and that I
2731 was looking to them for their advice and guidance on how
2732 they would propose we execute on this campaign.

2733 And I said one of the concrete outcomes of that phone
2734 call was she sent me that statement of work for the Zika
2735 work that CDC had done.

2736 Q What was Mr. -- strike that.

2737 What was Ms. Galatas' reaction to the funding
2738 transfer?

2739 A You know, just it was more of about, well, how
2740 do we go about executing this? It was -- it wasn't
2741 anything that she was involved with, nor was I, in terms of
2742 the decision that was made. And Kate and I go back many,

2743 many years as professional colleagues.

2744 Q Did she make any statements in regards to the
2745 funding transfer?

2746 A You know, I will say I think feelings were
2747 hurt, you know, that CDC wasn't going to lead this. There
2748 were some other subsequent conversations that I had with
2749 CDC officials that happened before Dr. Redfield made that
2750 statement. I'm happy to talk about those a little bit.

2751 And, you know, the point that I consistently made
2752 was, "Look, I've worked with you all for 30 years. We're
2753 going to do this together, and we're going to do it with
2754 all of HHS." And throughout the entire process, we made a
2755 commitment that -- the team that eventually formed in ASPA,
2756 we made a commitment to over-communicate with CDC to just
2757 make sure they were aware what was going on and we could
2758 benefit from their advice.

2759 Another -- a subsequent call after that -- there were
2760 two other calls. I called the head of the Tips campaign
2761 and asked for her advice and guidance and said, I'm going
2762 to be looking for staff. So if you have anybody who's
2763 looking for a once-in-a-lifetime opportunity, I hope, to
2764 lead a public education campaign around a national crisis
2765 of unprecedented significance in our lifetime, now is the
2766 opportunity. And Diane -- Diane Beistle is her
2767 name -- again, great colleague. Done some incredible work.

2768 And then third phone call was to Kathy Crosby at FDA
2769 who runs their Real Cost campaign, again, asking, seeking
2770 advice, guidance, how would she go about approaching this?
2771 What were her thoughts? Making the pitch for staff as
2772 well. Because this is -- and again, Kathy was incredibly
2773 gracious, again, colleague for many, many years, understand
2774 the importance of this to the country and the viability of
2775 communication science in terms of creating messaging that
2776 could resonate with the public.

2777 So literally in the first 48 hours, you know,
2778 it's -- it would be -- you know, I'm like there's \$300
2779 million and we have to do something with it and we've got
2780 to do something smart. And the time is of the essence
2781 because the nation is in the midst of a public health
2782 crisis.

2783 Q So --

2784 A So -- go ahead. Sorry. Just like -- that's
2785 sort of like that immediate maybe 48 hours, maybe 72, after
2786 the allocation of funds.

2787 Q Which was in early July, correct?

2788 A Correct.

2789 Q Okay. You had mentioned in your call with
2790 Ms. Galatas that feelings were hurt because CDC was not
2791 leading this campaign; is that right?

2792 A Yeah. I mean, it was a fair assessment. And

2793 folks -- folks felt like they should run the program. And
2794 at the same time, the importance of putting it in an
2795 organization like ASPA, it really creates an all-of-HHS
2796 approach.

2797 So what I mean, we're out of that time zone a little
2798 bit again, but it's like as we got down the road, one of
2799 our primary audiences was seniors. Well, I picked up the
2800 phone, I'm on the phone with CMS, who talks to every senior
2801 in this country almost every day. So we aligned with CMS
2802 our campaign resources.

2803 When we were talking -- when we got to the point of
2804 talking with community health centers, pick up the phone,
2805 get on the line with HRSA. When we wanted to use Head
2806 Start instructors as an incredible resource in the
2807 community, talk to ACF.

2808 So the value-added of being in the Office of the
2809 Secretary, ASPA, really created that whole-of-HHS approach,
2810 which again, I'm getting a little ahead, but is well
2811 documented. We had weekly updates across the department
2812 making sure people were aware, were involved, engaged, had
2813 an opportunity.

2814 But -- so again, walking into this project, my first
2815 calls were CDC, were FDA, the individuals with the
2816 expertise about how to go about doing this. And then the
2817 task at hand was to get messaging out as quickly as

2818 possible, but also knowing there was not a contract
2819 mechanism available to allocate funds.

2820 So now I'm going to move past that 72 hours or defer
2821 to you until we move there.

2822 Q Let's just stick there real quick, if you
2823 don't mind. A couple of follow-up questions.

2824 A Sure.

2825 Q And sticking with your conversation with
2826 Ms. Galatas for a moment, you had mentioned some other
2827 major public health campaigns that maybe you were using as
2828 a barometer for the \$300 million --

2829 A Yes.

2830 Q -- that was going out there. Were those run
2831 out of ASPA?

2832 A No.

2833 Q Where were they run out of?

2834 A One was run by CDC and one was run by FDA.
2835 Both were on tobacco. So you see how -- you know, it's
2836 like bringing all of the department together was one of the
2837 value-adds here. So you had different parts of the
2838 department doing different things at all times.

2839 Q In your tenure at HHS, did ASPA ever run a
2840 large-scale messaging campaign, public health messaging
2841 campaign?

2842 A Again, you're going a little out of scope

2843 here, but prior to my arrival at ASPA, ASPA ran the H1N1
2844 campaign.

2845 Q Any others you can think of?

2846 A Again, when I arrived at ASPA, there was work
2847 being done with the Ad Council. I'm actually -- I can't
2848 quite remember what the topic was. But it is not
2849 unprecedented for ASPA to run significant public education
2850 campaigns. It's not usual, but it's not unprecedented.

2851 Q I think you mentioned in the first three calls
2852 that you had within 48 to 72 hours, you communicated that
2853 you were looking for staff; is that correct?

2854 A That's correct.

2855 Q Did you receive any staff from CDC or FDA who
2856 worked on the campaign?

2857 A From FDA, not CDC. Also NIH, GSA, Census.
2858 Quite -- we did quite a broad net. It was an incredible
2859 group of people that came together, you know, recognizing
2860 the time of need for the country, ability to apply their
2861 skills. Our market research person came from Census, was
2862 wrapping up the 2020 Census. Amazing individual.

2863 A presidential management fellow who was at NIH came
2864 on board. We'll talk probably more about this. April
2865 Brubach came from FDA, who was one of the key managers of
2866 the Real Cost campaign. She was the COR for the contracts
2867 that ASPA awarded.

2868 So absolutely. The HHS team stepped up. People
2869 signed up for the challenge. They knew it wasn't going to
2870 be easy, and I warned them all from the very beginning that
2871 we would eventually be having these calls and that we were
2872 going to do everything right and ensure that we stuck to
2873 the science. And -- so anyway, yep. We'll back to the 24,
2874 72 hour. I'll get way down the road on you.

2875 Q Sure. And why did no one from CDC join the
2876 staff?

2877 A I have no idea. But we had -- we regularly
2878 consulted with them. We had at least a weekly phone call
2879 with the communications leadership just, again, to make
2880 sure they were aware.

2881 And, you know, I also consulted with Dr. Amanda Cohn
2882 from ACIP as one of -- not in the first 72 hours, but soon
2883 after making sure that however we moved forward with
2884 allocating resources, that it was based on the CDC model
2885 for addressing vaccine confidence. So you probably will
2886 see almost -- I will say almost every presentation, I can't
2887 guarantee every presentation, it starts with the CDC slide
2888 about a strategy for addressing vaccine confidence in the
2889 country and the components of what that would take.

2890 So again, that was some of the -- again, CDC
2891 statement of work, used the CDC framework for addressing
2892 vaccine confidence, consulted with some of the top experts

2893 at CDC to make myself as smart as possibly can be in a very
2894 short period of time so that -- so that we didn't waste any
2895 time getting onto the -- getting out to the public with
2896 some messaging.

2897 Q Okay. Got it. You mentioned weekly calls
2898 with CDC were set up; is that right?

2899 A Yes. Yes.

2900 Q When did those first begin happening?

2901 A So this -- those probably started
2902 mid-September. Because -- and hear me, there was a lot of
2903 work to do to get to the point where you had something to
2904 talk about, and that work starts sort of after that initial
2905 72 hours. So happy to transition into that or answer
2906 additional questions.

2907 Q We're getting close, I promise. We're getting
2908 close.

2909 A No, no, no. Hey, I'm all yours. You've got a
2910 day. Worse case scenario you call me back.

2911 Q And just to clarify, you had a call with
2912 Ms. Galatas in early July. In mid-September regular weekly
2913 phone calls with CDC were set up.

2914 In between those two periods did you have any other
2915 conversations with anyone from CDC regarding the campaign?

2916 A Absolutely. And again, I mentioned Amanda
2917 Cohn. She actually came to DC. She sat in my office for

2918 several hours. We mapped through what a strategy might
2919 look like. She and actually my colleague Bill Hall
2920 suggested some experts from outside of government that I
2921 should talk to, organized phone calls with them. Because
2922 these are folks who had been through flu year after year
2923 after year, H1N1, the lessons learned from those
2924 individuals.

2925 It's like I -- to be a wise steward of these dollars,
2926 I don't want to be -- I'm not the expert on these things,
2927 but I needed to have a team of experts that I could call on
2928 quickly. We set up a formal review process, but I also
2929 just needed to make sure this effort got off to the best
2930 start possible to make that outreach.

2931 So that was -- those calls were happening in that
2932 July time frame and ongoing into September. And again, I
2933 continued to consult with them throughout. As we got to
2934 that September time frame, again, it became more of a
2935 weekly routine, regular, recurring communication with a
2936 broad group of people. But again, we're still at 72 hours.
2937 I haven't even written two statements of work yet.

2938 Q You had mentioned that you had some calls
2939 during this period outside of the 72 hours, in this
2940 July-through-September period with outside experts; is that
2941 right?

2942 A Yes. Yes.

2943 Q Do you recall who some of those experts were?

2944 A Bruce Gellin was one. He used to run
2945 our -- the -- I can't remember the name of the office here,
2946 but the vaccine program office in OASH. And I'm blanking
2947 on the name of the other individual. I can -- if it comes
2948 to mind -- of similar nature.

2949 I also even consulted -- there's a group of countries
2950 that -- like Great Britain, Australia, sort of the former
2951 colonies kind of deal. That's not the right way to call it
2952 right now, but consulted with them about their approaches
2953 in the international space and shared with them some of the
2954 ideas we were thinking of moving forward here.

2955 If I recall the name of that group, I'll let you know
2956 what we're talking. And then the other individual. Sorry,
2957 just can't think of it right now.

2958 Q That's okay. Let's then go back to the
2959 September 16, 2020 testimony from Dr. Redfield.

2960 A Okay.

2961 Q Again, he stated that CDC -- this is a
2962 quote -- "had not been involved other than given the
2963 directive from HHS and OMB to transfer the funds."

2964 Obviously, we've been discussing now some of the
2965 actions you took between July and September. Did you have
2966 any discussions with anyone in CDC regarding Dr. Redfield's
2967 testimony?

2968 A I did not.

2969 Q Did you have any discussion with anyone within
2970 HHS regarding Dr. Redfield's testimony?

2971 A I did not.

2972 Q With anyone?

2973 A Nope. Not prior.

2974 Q But subsequent to his testimony?

2975 A Yeah. Subsequent -- so when -- if I recall
2976 correctly, I think Dr. Redfield said \$250 million, not 300
2977 million. And -- for some reason that sticks in my head.
2978 And so the -- there were immediate media inquiries on the
2979 topic. So the question I was involved in at that point in
2980 time would be source of funds and is it true and
2981 the -- well, why isn't CDC running this?

2982 And, you know, the -- we had answers to all of those
2983 things, I mean, ultimately at that point in time. So that
2984 would be the only discussion. And none of that was
2985 directly with Dr. Redfield. That was more of a being
2986 reactive versus proactive, if I may.

2987 Q Sure. Did you have any conversations with
2988 Mr. Caputo about CDC's involvement on the PR campaign?

2989 A No. And with the concept being I knew every
2990 agency at HHS would be involved, and knowing that CDC would
2991 be overly involved just given the expertise that resided in
2992 that agency.

2993 Q Got it. But again, no one from CDC was taken
2994 as staff to work on the PR campaign?

2995 A That's correct.

2996 Q Okay. Let me ask you -- and I think there's
2997 an exhibit. I'm not sure we need to go to it, but we can
2998 if we need to.

2999 In response to some questions regarding the PR
3000 campaign in mid-September 2020, you had mentioned in an
3001 article or was cited as such, that a department-wide team
3002 of experts would be consulted on the campaign's materials.

3003 A Mm-hmm.

3004 Q Could you just describe what this consultation
3005 process looked like and who was involved?

3006 A Yeah, absolutely. So Michael Caputo -- I
3007 drafted and Michael Caputo sent an e-mail to all of the
3008 agency heads and office directors basically outlining the
3009 goal of the campaign. And we were asking for a lead point
3010 person that could speak on behalf of their agency and
3011 office and ensure that materials that needed to be reviewed
3012 would get to the right people.

3013 So based on that e-mail that asked for a primary
3014 point of contact that their job was to represent the agency
3015 or office and to ensure that any content that was generated
3016 by the campaign was reviewed by the appropriate person or
3017 people, we generated a list of the review committee.

3018 So that review committee started off -- I pretty much
3019 had one person from each agency. It very quickly grew into
3020 a very large group of people, which was -- which was
3021 welcome. It added additional perspective. And materials
3022 developed for the campaign by end of September -- and if
3023 not, by the end of September -- were all going to that
3024 review committee for review and comment.

3025 It was a -- it was quite a logistical effort to make
3026 sure that we shared content, made sure we addressed
3027 concerns and comments. They were -- it was very
3028 complicated. We had spreadsheets and all sorts of things
3029 to address what -- I'm making up -- what CDC said, what NIH
3030 said, what CMS said. But, you know, the process was, I
3031 felt, successful, and we were ensuring, again, that people
3032 had a chance to review and comment on the materials.

3033 And it also served as another purpose. There were
3034 two other things going on here. Involvement and
3035 engagement. If people know what's going on, they're more
3036 likely to contribute in a constructive way, which was the
3037 goal. And then secondly, in addition to the review of
3038 materials, we had a weekly update that I sent out on
3039 Tuesdays.

3040 And so every Tuesday it's like here's the latest on
3041 the campaign. Heads-up, you know -- I'm thinking of
3042 something that happened in December -- but heads-up. We've

3043 got some materials we're working on with the Ad Council.
3044 We're going to be -- you'll be seeing that coming your way
3045 in about a week.

3046 You know, so -- but it was a regular communication
3047 that went out to the entire department -- well, the
3048 points and people who wanted to be included. No one -- no
3049 one was excluded. Anybody who asked to be on that weekly
3050 update, they were added. No questions asked.

3051 The review committee, most everybody -- anybody
3052 really who asked to be on it was put on it, but I needed to
3053 manage this large program, really needed a point of contact
3054 to help sort through. Because HHS is a big place, lots of
3055 opinions and ideas and we wanted to make sure we stuck to
3056 the science.

3057 Q Sure. Sounds like it was a lot of folks who
3058 were on this department-wide team as it was described.
3059 Will you just identify some of the folks who were the most
3060 active on the team?

3061 A You know, I would say -- going with names,
3062 it's going to be a little difficult because there were so
3063 many folks. But the most active, CMS, amazing partners. I
3064 mean, they were awesome in understanding the initial phase
3065 of really working with seniors and making sure that the
3066 seniors got the messages around the vaccination.

3067 HRSA with the community health centers, absolutely

3068 engaged. Again, some of the initial public education
3069 materials going out through community health centers, they
3070 would adapt our materials, we would adapt theirs. I mean,
3071 just a good partnership there.

3072 FDA making sure as vaccine news was coming out and,
3073 again, the great news about the effectiveness of the
3074 vaccines and ensuring that we didn't advertise vaccines in
3075 a way that were not consistent with FDA approval. I mean,
3076 that was a struggle. Everybody wants to say, oh, they're
3077 safe and effective. Well, no, they just had -- they had
3078 had their preliminary approval, and so we worked very
3079 carefully around that.

3080 And of course CDC. I mean, CDC -- again, we set up
3081 special conversations on a weekly basis with CDC
3082 communications leadership. Lynn Sokler was the person CDC
3083 designated as our liaison. So it was like, Lynn, got to
3084 talk to you. Lynn, here's what we're thinking about in
3085 terms of the market research. Here's what we're thinking
3086 about in terms of the focus groups. Here's what we're
3087 thinking about in terms of the work with the Ad Council.
3088 Because -- and so as much as we possibly could engage CDC
3089 around that in terms of what our -- again, everybody was
3090 informed about the planning, and there was
3091 over-communication with the CDC communications team.

3092 Q And who at FDA was the liaison? What was that

3093 name?

3094 A You know, I'm blanking on that name. It was
3095 not Wolf, in case that's the question. It was -- all of
3096 these folks were career staff. The primary
3097 points -- initially some of the primary points were
3098 Schedule C, but ultimately it was all career staff.

3099 I could dig through e-mails and figure out who some
3100 of the folks are, but -- well, actually, I don't have
3101 access to my e-mails anymore, so you'll have to talk to
3102 Kevin about that.

3103 Q And CMS as well, do you recall who the lead
3104 liaison was?

3105 A Chris Koepke.

3106 Q I think you had mentioned weekly updates began
3107 going out. Could you say when that process began?

3108 A Yeah, probably -- probably -- well, probably
3109 initiated that process towards the end of October, because
3110 as you probably are going to bring up in a little bit,
3111 Secretary had to review the effort. And so the -- as we
3112 continued to do our market research, we were standing down
3113 on the public engagement part.

3114 Q And I don't want to confuse two different
3115 things. Just to clarify --

3116 A That's like a timeline versus -- I don't know
3117 if we've moved beyond -- we haven't even gotten to the

3118 statement of work yet. But anyway --

3119 [Exhibit 13 was identified
3120 for the record.]

3121 BY [MAJORITY COUNSEL].

3122 Q Sure. And if you'd like to reference it, it's
3123 Exhibit 13. It's a September 25, 2020 article.

3124 A Yes.

3125 Q The relevant portion here is on page 4, should
3126 be paragraph 6, where it just cites you and it mentions
3127 that there was a department-wide team of experts who would
3128 be consulted on the campaign's materials. I understand
3129 that subsequently, there was a review ordered by the
3130 Secretary. Were these -- these were two different teams;
3131 is that correct?

3132 A The experts that reviewed materials, which was
3133 generated mid -- the initial list of those individuals was
3134 generated mid-September as a result of the Michael Caputo
3135 e-mail that went out. And then the -- there was a
3136 different group of individuals who reviewed the campaign
3137 proposals and merits back in -- I think it was early
3138 October when we had that initial meeting of that review
3139 committee.

3140 Q Okay.

3141 A So those -- two different groups, yep.

3142 Q Got it. And we'll get to that second one

3143 later.

3144 A Okay.

3145 Q But sticking -- again, this first
3146 department-wide team of experts, again, you've mentioned
3147 the -- some of the agencies, you appointed liaisons and
3148 they were involved, and you mentioned the weekly meetings
3149 that were going on.

3150 When did this process, this consultation process for
3151 the campaign materials, when did it begin?

3152 A So -- with this group of experts?

3153 Q Correct. Yes.

3154 A So again, that really didn't start until
3155 mid-October, because there wasn't -- we're missing a big
3156 chunk of time here. But the main campaign had not begun to
3157 produce materials yet. So everything that -- everything
3158 that happened prior to that was really focused on the
3159 celebrity approach and -- you know, so happy to talk about
3160 how those materials were reviewed.

3161 Q Sure. I think we'll get there in a bit. Just
3162 to put a finer point on it, I know that this Politico
3163 article was September 25, 2020. Again, it's not a quote
3164 from you, but it's saying that a department-wide team of
3165 experts would be consulted. So up until that point, there
3166 hadn't been any consultations with any department-wide
3167 experts?

3168 A Not department-wide, but what I shared with
3169 you about picking up the phone, calling people who were
3170 knowledgeable across the department, those that worked in
3171 CDC, CMS, et cetera. You know, so it wasn't a
3172 systemic sustained effort like what we created with the
3173 review team, but -- and again, we've got a very short
3174 window of time here that we were -- we were using
3175 individuals that we knew were knowledgeable about science
3176 and the work to review messaging.

3177 So sustained systemic effort mid-October based on the
3178 mid-September ask of Michael Caputo. And by the end of
3179 August, we actually had some creative on the street.
3180 So -- which had been reviewed by knowledgeable experts from
3181 agencies. But again, it wasn't that sustained systemic
3182 approach.

3183 Q Let me first just ask you, you said that
3184 Mr. Caputo made a request in mid-September for there to be
3185 a consultation process on the campaign materials; is that
3186 right?

3187 A That is correct. That's when the e-mail was
3188 sent.

3189 Q And was that subsequent to Dr. Redfield's
3190 testimony before the Senate?

3191 A The two are not related, I mean, at all.
3192 Setting up a department-wide review committee was always

3193 part of my plan, period. So I -- whether it happened
3194 around the same time or whatever, but I can tell you it
3195 was -- the two things were not related. It was always part
3196 of the plan.

3197 Q And you said that you had some -- I'm sorry if
3198 I cut you off there.

3199 A No.

3200 Q You said that you had some creative on the
3201 street as of late August. Do you recall what that creative
3202 was?

3203 A Yeah. Actually, yes. So -- so again, I'm
3204 going to go back to that. There's the urgent need to have
3205 some basic public health messaging about what we ultimately
3206 called slowing the spread, the wearing your mask, social
3207 distancing. And we recorded some radio PSAs with the
3208 surgeon general. Scripts were reviewed, again, by a team
3209 of experts, CDC, FDA. You know, again, I don't remember
3210 who, but I'm sure we could dig up an e-mail somewhere,
3211 but -- of what those scripts said. And again, that also
3212 was very much the -- you know, I remember the tensions
3213 that -- between FDA and CDC and the precision we used in
3214 terms of wording and what the public would understand.

3215 So anyway, nationwide radio advertising. Surgeon
3216 general. We prioritized markets where rates of COVID were
3217 highest. But again, it was a nationwide with priority in

3218 the top 15 markets release. And those ads ran pretty much
3219 the end of August through the beginning of October, I
3220 think, if I remember correctly.

3221 Also, there was a period at that time where, again,
3222 convalescent plasma was thought to be an available therapy.
3223 So we did some out-of-home advertising -- code word is
3224 billboards -- encouraging individuals to donate plasma. We
3225 used the surgeon general, Dr. Fauci, Dr. Hahn in those
3226 billboard out-of-home advertising. And it was just
3227 basically encouraging individuals to donate plasma,
3228 individuals who had tested positive and -- in order to
3229 build the supply, depending on how the therapies worked
3230 out.

3231 So those were in-market really quick. And try not to
3232 confuse things, but that -- those initial ads were created
3233 and run through a contract that was in existence in ASPA.
3234 So it was Crosby Marketing. And so it was within the scope
3235 of work for that contract, and that was -- that was one way
3236 we were able to get some messaging out quickly around
3237 plasma donation as well as the major investment there was
3238 around the radio with the surgeon general.

3239 Q Got it. And so the creative you're talking
3240 about being on the street in late August was not done under
3241 either of the two contracts we discussed in Exhibit 12 --

3242 A That is correct, with the addition of the

3243 radio ads were extended through the Atlas contract. So
3244 Atlas was now -- the Atlas contract was in play, the Crosby
3245 contract had hit its ceiling. The things I learned about
3246 contracting, but -- over the years. So the Crosby contract
3247 had hit its ceiling. We couldn't use that anymore. Atlas
3248 came into play. We had an urgent -- again, an urgent need
3249 to continue that messaging, so we re-upped the radio ads
3250 through the Atlas contract.

3251 Q Got it. I think one more question from me on
3252 the consultation process as referenced in the Politico
3253 article, Exhibit 13. So again, not the later strategic
3254 review ordered by the Secretary. What did you think the
3255 purpose was for this consultation process?

3256 A Oh, it was vital to the success of the
3257 program. We had -- to be successful, we had to engage the
3258 entire department and engage the right people across the
3259 department. This was our way of bringing in individuals
3260 who had been appointed by leadership to, again, ensure what
3261 we were using in our messaging was consistent with the
3262 latest science, with the regulations of FDA. And it
3263 involved those individuals in -- again, as I said to you,
3264 this is a -- not that I'm happy we had the opportunity, but
3265 this is a once-in-a-lifetime public education campaign that
3266 people have dedicated their lives to here at HHS and people
3267 wanted to be involved. And the best way to involve them is

3268 to engage them, inform them, share information broadly.

3269 And that's what this review committee was about.

3270 We started with the point person, and like I said,
3271 the group grew to -- again, anyone who wanted to be part of
3272 it, they were added. This was not about keeping something
3273 secret because as soon as we fall into that category, you
3274 end up undermining the work the department's doing.

3275 Q You said that anyone who wanted to be added to
3276 that group would be added. Were there any folks outside of
3277 government who were added to that group?

3278 A Yes, actually. We worked very closely with
3279 the Ad Council, purposely included them. They purposely
3280 included us, you know, because we are the two major players
3281 in the game. And again, years and years and years of work
3282 personally and through the department in collaboration with
3283 Ad Council really formed a strong foundation for that
3284 partnership.

3285 And again, you know, I'm like this was about a public
3286 health emergency. This was about science-based messaging.
3287 This is about using what we have at the time in the best
3288 way possible so that -- and what I mean by that is we had
3289 some basic public health messaging that we could get out
3290 early.

3291 But as we moved -- shifted towards the vaccine
3292 hesitancy part, that we had to be so careful in terms of

3293 crafting those messages for specific audiences. So it
3294 wasn't really just a matter of watch your distance, wear
3295 your mask, consult with your physician.

3296 So the campaign -- the campaign evolved based on the
3297 intelligence we had about our audiences.

3298 Q Got it. Okay. Let's dive into the Atlas
3299 contract.

3300 A Correct.

3301 Q So -- and I -- for reference, you can look at
3302 page 2 of Exhibit 12, which is the letter to Chairman
3303 Krishnamoorthi dated November 13, 2020. You'll see this is
3304 the Immediate Surge contract awarded by the FDA on August
3305 26, 2020.

3306 Are you familiar with the contracting process under
3307 which this was awarded to Atlas?

3308 A Intimately.

3309 Q Could you describe how that process went?

3310 A Yeah. Absolutely. So a context point here.
3311 So FDA provided the vehicle for awarding a contract. So
3312 FDA didn't manage it. FDA didn't manage the project. FDA
3313 just provided a vehicle. So -- like, NIH provided a
3314 vehicle, like other organizations here provide vehicles, so
3315 just to be really clear about that.

3316 The -- and I say there were three phases of this
3317 project: Emergency, Immediate Surge and Short Term.

3318 That's like -- so all -- a lot of this was happening
3319 concurrently. The government we like to do things
3320 sequentially. I didn't have that luxury.

3321 So the Immediate Surge contract was a let's -- the
3322 construct here was let's get basic public health messaging
3323 out to intended audiences using celebrities. And you would
3324 look at the celebrities in terms of who they influenced.
3325 So if you're trying to reach an African-American community
3326 or Latino community or rural white community, it's like
3327 what celebrities had a heavy influence in those
3328 communities, and then where you would target the ads.

3329 So this was the Immediate Surge, have it -- it was a
3330 very tactical approach at that point in time, but it helped
3331 us use people who had influence with audiences convey a
3332 public health message. And it wasn't just celebrities out
3333 there talking, it was celebrities being paired with a
3334 respected doctor, clinician, public health professional,
3335 someone in the community. So that was where this Immediate
3336 Surge contract was going.

3337 FDA offered a mechanism and FDA -- this is a little
3338 bit where I engaged with Wolf -- FDA initially said they
3339 could do this in a week. And I'm like there's to way you
3340 can do this in a week. But you say you can do it in a
3341 week, let's go for it.

3342 Crafted this statement of work, and I engaged with

3343 the contracting officials about the possibilities. And the
3344 contracting officials were very clear to me, it's like this
3345 does not happen in a week. The only way we can do this is
3346 if we have organizations that have competed for similar
3347 work available to us off of a preapproved list.

3348 And so the FDA contracting office -- we have two
3349 organizations here that could potentially do this work:
3350 Atlas and True North. So you draft up, me, Mark Weber,
3351 draft up a statement of work. FDA contracting office puts
3352 all the ornaments on it of the requirements, and we will
3353 compete it between those two organizations.

3354 Drafted the statement of work. A request for
3355 proposals was sought from True North as well as Atlas. A
3356 technical advisory panel of career officials, including
3357 myself as the chair. The other person was a gentleman by
3358 the name of Michael Murphy, who works in procurement for
3359 FDA, and then April Brubach, who ultimately became the
3360 project officer, the three of us reviewed the proposals, we
3361 scored the proposals. It is all documented as a technical
3362 evaluation panel document.

3363 And based on the scores of the proposals matched with
3364 the criteria that was outlined in the request for
3365 proposals, I made the recommendation that Atlas be funded
3366 based on the merit of the proposal. The FDA contracting
3367 officers accepted that recommendation and a contract was

3368 awarded.

3369 Q Okay. Now, that's helpful background. You
3370 mentioned that FDA offered a vehicle for this contract.

3371 A Yes.

3372 Q Do you recall the circumstances of that offer?

3373 A Again, that was initially with Wolf Wagner.

3374 He's the one who was like we can do this in a week. And

3375 I'm like, oh, well, okay. I'll take you at your word. Let

3376 me make some phone calls to people who run contracting.

3377 And the people who run contracting were like they can't do

3378 it in a week. But recognizing the importance of the work

3379 and the importance to the country and what we were

3380 attempting to do, they were going to make it a priority to

3381 get it done as quickly as possible.

3382 Q Do you recall when you had that conversation
3383 with Mr. Wagner?

3384 A Probably towards the end of July, after that
3385 initial 72 hours. I needed a week to figure out how I was
3386 going to do all this. But yes, end of July. Sorry.

3387 Q Was anybody else on the call or in the meeting
3388 with you?

3389 A Not that I really recall. I mean, it
3390 was -- Wolf came -- I -- I know he came to my office a few
3391 times and we talked about it, because, you know, the
3392 conversation was how do we get contracts awarded?

3393 They're -- you know, I also had an educational process to
3394 go through with my political colleagues that money doesn't
3395 come with a checkbook, that you have to have a vehicle and
3396 there's accountability for these dollars and there's
3397 reasons there's competition and all sorts of things.
3398 Which, you know, it's like everyone wants stuff done now
3399 and -- but there is a way that we need to do it and that is
3400 how we did it. So Wolf -- Wolf offered FDA.

3401 I was aware of the NIH public information and
3402 communication services contract. Again, worked with NIH
3403 for years and was really glad to know that that vehicle
3404 existed. And these vehicles were put into place just for
3405 this, for -- digress one second.

3406 To award a \$300 million contract flat out without
3407 these vehicles being set up by the agencies is a 12- to
3408 18-month process at best. And that's unacceptable. That
3409 doesn't work in times of a public health emergency. So
3410 that's why we went with the vehicles, what is available,
3411 what can we do within the rules, and that awards money in a
3412 competitive way that will be effective in getting the job
3413 done.

3414 So anyway, that's -- Wolf brought to me the FDA. You
3415 know, there was even a concept of all of the money going
3416 through the FDA mechanism. But once I talked with the
3417 contracting officers, I also realized that was not a

3418 reality. It just would not be feasible.

3419 Q Did you have other conversations with
3420 Mr. Wagner about how to spend the money or award contracts?

3421 A No, not at all. I found my source of
3422 information.

3423 Q So he approached you and informed you that an
3424 FDA contract vehicle existed; is that right?

3425 A Yes. Yes. He was very sure that he could get
3426 all of this awarded in a matter of a week. I distinctly
3427 remember that. I'm like, hmm, I don't think so. But I'm
3428 willing to listen to anybody. If they can do it legit, I'm
3429 all ears.

3430 Q And looking at Exhibit 12 just briefly on that
3431 page 2, it just notes that the Immediate Surge contract was
3432 awarded after a limited competition.

3433 Do you have any insights into how this contract was
3434 categorized as a limited competition contract?

3435 A So again, the urgency, public health emergency
3436 allowed us to do a more limited competition in terms of
3437 expediency. So those were all factors that went into the
3438 discussions about using the FDA mechanism and the
3439 organizations that were currently vetted and available to
3440 do the work.

3441 Q Okay. And not to jump too far ahead, but was
3442 the other contract awarded that's noted here, the Short

3443 Term contract, was that awarded under the same exigency,
3444 limited competition?

3445 A No. So Short Term was -- because it was much
3446 bigger and -- I don't want -- more comprehensive and built
3447 on the foundation of communications science and was
3448 primarily focused on the vaccine hesitancy, which is an
3449 incredibly, as you know, complicated subject, it -- I went
3450 to -- I contacted NIH and I asked them, I said, look,
3451 here's what we're working on. Can we use the PICS II
3452 IDIQ -- indefinite quantity and quality or
3453 whatever -- mechanism for awarding this contract? And the
3454 head of communications for NIH says absolutely. This is
3455 what it's for. Let us know how we can help.

3456 Again, one of -- an exciting point -- high point for
3457 me in my career is how people made this a priority, because
3458 they felt like it was a way they could give back and
3459 contribute to the public health response. So procurement
3460 people were excited about doing this work. I've never seen
3461 procurement people excited about doing work. But they were
3462 involved, they prioritized, made sure that everything was
3463 working in the way that it was supposed to work and
3464 individuals were informed.

3465 So because it was a much more comprehensive -- the
3466 short-term one -- comprehensive approach, I chose the NIH
3467 PIC mechanism which had ten organizations that had

3468 previously competed for their ability to do comprehensive
3469 communications work, and those ten organizations were
3470 invited to compete for this particular project.

3471 Q Okay. And I know we're close to our hour
3472 here. One final question on this point before we take a
3473 break.

3474 The contract that was ultimately awarded to Atlas for
3475 about \$15 million through this FDA vehicle, was all
3476 \$15 million from the \$300 million that ASPA had transferred
3477 from CDC?

3478 A Yes.

3479 Q Okay.

3480 A All the money I've talked about is part of
3481 that 300 million. So the Crosby, Atlas, FMG.

3482 Q Okay. Okay.

3483 [Majority Counsel]. I think this is an okay place
3484 for me to stop now. And I think we can go off the record
3485 now to take our five-minute break. Thanks.

3486 [Whereupon, at 2:46 p.m., the interview in the
3487 above-entitled matter was recessed, to reconvene at 3:21
3488 p.m., this same day.]

3489

AFTERNOON SESSION

3490

[3:21 p.m.]

3491

[Majority Counsel]. I think we can go on the record.

3492

And, [Redacted], I'll turn it over to you.

3493

[Minority Counsel]. Thank you.

3494

BY [MINORITY COUNSEL].

3495

Q So, Mr. Weber, you said that this PR campaign,

3496

that you involved lots of different agencies in it -- or

3497

subagencies in it, correct?

3498

A Correct.

3499

Q And that was to ensure that it was accurate,

3500

the science was right, American people were getting the

3501

right message, right?

3502

A Absolutely.

3503

Q Was it a good -- because of that needed

3504

coordination, it was -- was it a good idea to have it

3505

spearheaded by ASPA instead of individual subagencies?

3506

A Absolutely.

3507

Q And then you also talked about how it was

3508

urgent to get the PR campaign contracts off the ground, and

3509

that when you were discussing getting the correct contract

3510

vehicle, that it needed to be one that wasn't going to take

3511

12 or 18 months, it needed to be ready to go as soon as

3512

possible; is that right?

3513

A Absolutely.

3514 Q And this was important because obviously we
3515 were in an unprecedented situation where the public needed
3516 to be informed?

3517 A Yes.

3518 Q Do you think up until this point everything
3519 was done to the best of everyone's abilities?

3520 A In terms of the communications work or --

3521 Q Sorry. Do you think the establishment of the
3522 PR campaign up until this point from both the
3523 communications aspects, but also trying to get it off the
3524 ground quickly was done correctly?

3525 A Yeah, absolutely.

3526 Q Awesome.

3527 [Minority Counsel]. That's all I have.

3528 [Majority Counsel]. Great. Thanks, [Redacted].

3529 BY [MAJORITY COUNSEL].

3530 Q Mr. Weber, I assume you're okay proceeding
3531 with the next session?

3532 A Yes, absolutely.

3533 [Exhibit 14 was identified
3534 for the record.]

3535 BY [MAJORITY COUNSEL].

3536 Q Okay. Great. So I'll direct you now to
3537 Exhibit 14 in your numerically numbered exhibits. And
3538 while you're getting there, I'll say for the record that

3539 this is a document that was produced by Atlas Research.
3540 The document is titled "COVID-19 PSA and awareness
3541 campaign. Client's twice-weekly meeting notes," and it's
3542 dated September 29, 2020.

3543 Mr. Weber, I'll direct you to the first page
3544 following the cover sheet. It lists a number of
3545 individuals as attendees, including you, and it marks you
3546 as present. Do you recall attending a meeting with these
3547 individuals on or around September 29, 2020?

3548 A Yes, absolutely. I attended many of these
3549 meetings, and I'm confident that I was at this one if they
3550 marked me present.

3551 Q Great. I want to ask you about a couple of
3552 folks on here. First, and you mentioned her already, is
3553 April Brubach, who is listed as the campaign director/COR
3554 in ASPA.

3555 A Yes.

3556 Q What was her role on the PR campaign?

3557 A So she was the program manager, if you will,
3558 by -- meaning the -- manager, oversight. She is the one
3559 individual who had authority to approve expenditures of the
3560 contractors. Janell also had that authority, but only when
3561 April would defer to her because of whatever reason.

3562 So April was, again, program manager, the only person
3563 with authority to approve expenditures, the only person who

3564 had the responsibility to provide tasks to the contractors.
3565 And if April didn't say to do it, they should not have been
3566 doing it. And if April said they should do it, they should
3567 be accountable for it.

3568 Q Great. We also see here representatives from
3569 a couple of different companies other than Atlas. DD&T,
3570 Grapeseed Media, Co/Efficient and BCW.

3571 Are you familiar with these individuals?

3572 A Some of them. So, like, in particular -- I'll
3573 just go through, Beth Mahan, Stefanie Lehmann, Rebecca
3574 Hart, Tim Tinker, Den Tolmor, Ryan Munce, Tyler Barnet.
3575 Anyway, those are the folks, just going through the list,
3576 I'm aware, know.

3577 Q Sure. And other than the Atlas folks, the
3578 other folks on here were all subcontractors under the FDA
3579 prime contract; is that right?

3580 A That's correct.

3581 Q Okay. And then very briefly, do you mind just
3582 describing a bit the different roles and responsibilities
3583 of those subcontractors?

3584 A So the subcontractor DD&T, sort of creative
3585 director. The Co/Efficient, again, the market research,
3586 the targeting. And then with Grapeseed just sort of
3587 developing the communication strategies and channels based
3588 on the research.

3589 So the concept, again, was identifying celebrities
3590 that had influence in particular audiences, taping messages
3591 with them and a credible -- official with credibility, and
3592 then targeting that information back to the audiences that
3593 that celebrity had influence over. That's sort of how they
3594 fit in there. And then the Atlas, Atlas was to pull it all
3595 together.

3596 Q Got it. Okay.

3597 A Oversimplified, but that gets to the point.

3598 Q That's very helpful. Thank you.

3599 [Exhibit 16 was identified
3600 for the record.]

3601 BY [MAJORITY COUNSEL].

3602 Q Let me -- let's move on to Exhibit 16. And
3603 while you're flipping to Exhibit 16, I will state for the
3604 record that this is an August 4, 2020 e-mail from an FDA
3605 contract specialist to a representative from Atlas
3606 Research. It was produced by Atlas Research.

3607 And you'll see the first e-mail in the thread, the
3608 FDA official e-mails a representative from Atlas attaching
3609 a draft solicitation for the Immediate Surge campaign and
3610 writing in the second paragraph, "The FDA has identified
3611 the following preferred subcontractors that are capable in
3612 starting the work immediately."

3613 Were you aware that FDA had identified preferred

3614 subcontractors to work under this contract?

3615 A Yes.

3616 Q And how were you made aware of that?

3617 A So Michael Caputo was interested in working
3618 with these organizations based on his experience and
3619 knowledge of these groups and his belief that they were
3620 ready to go in terms of being able to carry out the work.

3621 Q Are you aware of any criteria Mr. Caputo used
3622 to select these individuals as preferred subcontractors?

3623 A No, I'm not.

3624 Q Did you have any conversations with Mr. Caputo
3625 or anyone at HHS regarding how to identify preferred
3626 subcontractors?

3627 A How to identify -- no.

3628 Q What about more generally just about the
3629 concept of preferred subcontractors?

3630 A Extensive conversation about preferred
3631 subcontractors. And the extensive conversation was really
3632 around that, you know, we can't just pick and choose who we
3633 want to do work, and that there has to be a -- there's got
3634 to be openness, there's got to be competition for that
3635 work, and it has got to go through an acquisition process
3636 that has been reviewed and approved by general counsel and
3637 is consistent with FAR Act requirements.

3638 And so I will say I have worked for many political

3639 appointees who all want to work with a certain particular
3640 contractor, and the same conversation has been had with
3641 them. And by working with FDA, we found a mechanism that
3642 would allow two organizations to have the same information
3643 and compete for the work.

3644 Q And that's with respect to the Atlas Research
3645 contract and the Fors Marsh Group contract? Is that what
3646 you're referencing there?

3647 A No, that is with respect -- so the True North
3648 group also received the exact same information.

3649 Q Regarding these preferred subcontractors?

3650 A That's correct.

3651 Q And again, Mr. Caputo, to your knowledge, is
3652 the individual who wanted these companies to be identified
3653 as preferred subcontractors?

3654 A Yes.

3655 Q Do you recall anyone in HHS or FDA addressing
3656 concerns about identifying preferred subcontractors?

3657 A I wouldn't say expressing concerns, but it's
3658 more of, like, if this is what you want to do, here's how
3659 we can do it and comply with FAR Act requirements. It's a
3660 matter of, again, being open, transparent, and providing an
3661 opportunity for a competition, in general. That's not the
3662 specific requirements, but that is the intent.

3663 Q So it was aware -- it was known in HHS that

3664 Mr. Caputo had prior relationships with these
3665 subcontractors?

3666 A I don't know it was known within HHS or who
3667 might have known. It was brought to my attention in the
3668 procurement process that he had a prior relationship with
3669 Den Tolmor, and which -- doing my due diligence, I also
3670 looked up each of these organizations to see what they were
3671 capable of, what they advertised their ability to do work,
3672 I mean, just to make sure we were in the ballpark.

3673 And through the work we did actually with Crosby, the
3674 Crosby team brought to my attention that Michael Caputo had
3675 had a relationship with Den Tolmor before, which I
3676 immediately walked into Michael Caputo's office, I said,
3677 apparently you have some working relationship with this
3678 individual. I don't know what it is. I said, I want to
3679 make sure you are aware that I know this, that other people
3680 know it, and just as we move forward, I imagine people will
3681 ask questions about it. But, you know -- so we decided to
3682 proceed and then this is the competition that was run by
3683 FDA.

3684 Q And when do you recall having that
3685 conversation with Mr. Caputo?

3686 A It would probably -- probably be in August,
3687 mid-August. Because that would be the time we
3688 started -- again, I mentioned we started putting out some

3689 advertising through Crosby, and the question was -- and the
3690 way this came about was understanding the creative desire
3691 to work with celebrities, and here are some individuals
3692 that could help do it that work with celebrities. And the
3693 Crosby team called me and said, are you aware that Den and
3694 Michael had a previous working relationship? And I said
3695 no. I said let me walk in the room and ask him about this.
3696 And, you know, this is something that if you don't want to
3697 proceed with, just -- you know, that's fine.

3698 So again, confronted -- and I don't want to say
3699 confronted. That's a strong word. Had a conversation with
3700 Michael and said, you know, this is going to create some
3701 issues down the road. And if you want to proceed, we can
3702 proceed, and this is the path forward. We have to be open
3703 and transparent about it in the competitive process.

3704 Q Got it. And just to clarify, when Crosby
3705 informed you of this prior relationship, was that also in
3706 late August?

3707 A Yes.

3708 Q I'm sorry, mid -- pardon me. You tell me,
3709 when did Crosby tell you about this?

3710 A Yeah, it's most likely late August. Mid to
3711 late August. Because again, that's when we were getting
3712 some of the -- getting some information out through radio,
3713 and then there was the plasma donation, and the desire to

3714 work with DD&T. And, you know, there just -- there was not
3715 a transparent way of doing that.

3716 Q And when you had this conversation with
3717 Mr. Caputo and expressed your concerns, what did he say in
3718 response?

3719 A He said let's proceed. And I explained to him
3720 the process that we would use with the FDA procurement
3721 that, again, it had to be something that everybody could
3722 see, that the organizations that were able to compete for
3723 the information could choose to use or not. And so he
3724 agreed to go forward with that. I mean, there really was
3725 no choice. There would be -- actually, I would not be
3726 involved if there was another choice made.

3727 Q And what do you mean by that, that there was
3728 no choice?

3729 A What I mean by that is you just cannot hire
3730 individuals that you want to work with. There has got to
3731 be an open, competitive process that is documented. And
3732 that is what we worked with FDA to achieve.

3733 Q Got it. And those -- the steps you took to
3734 make this relationship transparent were identify them as
3735 preferred subcontractors?

3736 A Correct. Correct. So the organizations that
3737 were invited to bid on this work were provided this
3738 information.

3739 Q Any other steps that you took to disclose
3740 Mr. Caputo's prior relationship?

3741 A No, not that I'm aware of. I don't -- there
3742 wasn't any particular need.

3743 Q Did you learn anything else about his prior
3744 relationship with Mr. Tolmor when you had a conversation
3745 with him?

3746 A Didn't learn a lot. I just -- I know
3747 that -- I just knew that -- that actually Michael had
3748 worked for Den versus Den working for Michael. But --

3749 Q And you indicated that when you spoke with
3750 Mr. Caputo, you noted that his prior relationship which was
3751 undisclosed could cause issues down the road. What type of
3752 issues were you referencing?

3753 A Well, just the appearance of improper business
3754 relationships or improper procurements. And so I just
3755 wanted him to be very aware that this relationship could
3756 turn into something -- a distraction from the important
3757 work that needed to be done.

3758 And as I mentioned before, I did a little bit of
3759 homework myself on these individuals, the organizations and
3760 individual in the Den Tolmor case. And Den was quite an
3761 accomplished producer. Several feature films, incredibly
3762 creative work. So it was totally consistent with the
3763 vision that Michael had for how this campaign would work.

3764 Q And when you told Mr. Caputo that this could
3765 cause distractions or issues down the road, did he express
3766 any concerns about how that might impact the success of the
3767 campaign?

3768 A Not that I recall.

3769 Q Did he express any concerns about the
3770 relationship?

3771 A No. Just his -- the -- he felt like Den
3772 Tolmor possessed a unique capability to come up with the
3773 creative advertising that would be needed to engage the
3774 public.

3775 Q And in your experience at HHS, have you ever
3776 seen a prospective prime contract sent out with preferred
3777 subcontractors identified?

3778 A Not that I recall. But again, it's not
3779 something that -- unprecedented. Nothing -- nothing that I
3780 actually worked on had this -- used this approach.

3781 Q And you said it's not unprecedented. So you
3782 do know of this happening in other instances?

3783 A Yeah. I mean, it's -- I would have to go back
3784 and check from this standpoint, but often individuals who
3785 come in as political appointees will have individuals or
3786 organizations they would like to work with. And sometimes
3787 it happens and sometimes it doesn't. And as long as there
3788 is a mechanism available, there is a fair and open

3789 competition and the organization is capable of delivering
3790 on the goods, it is -- it is absolutely appropriate to go
3791 ahead and identify organizations that are capable of doing
3792 the work.

3793 Q If the prime contractors that you sent the
3794 draft solicitation to did not want to use the preferred
3795 subcontractors, would that --

3796 A Say it again.

3797 Q If the prime contractors that you sent the
3798 draft solicitation to -- you mentioned Atlas and
3799 another -- if they did not agree to use the preferred
3800 subcontractors, how would that impact their candidacy for
3801 the award?

3802 A It would have no impact. What had an impact
3803 is the merit of the proposals. So, you know, they were not
3804 required -- this was not a requirement, this was just
3805 here's a suggestion.

3806 Q Okay. So after the award is granted, it's up
3807 to the prime contractor to initiate with the preferred
3808 subcontractors?

3809 A Yes.

3810 Q You mentioned that Mr. Tolmor had certain
3811 filming experience. Are you aware of any public health
3812 campaign experience he had?

3813 A No.

3814 Q And then other than when it was brought to
3815 your attention in August with respect to Mr. Caputo's prior
3816 relationship with Mr. Tolmor, are you aware of anybody else
3817 in HHS who knew about this prior relationship?

3818 A It would be Janell on this list. It was
3819 probably Janell, if I recall correctly, who brought the
3820 information to me. She was also -- she was the COR on the
3821 Crosby contract.

3822 Q Got it. So when there was a concern about
3823 transparency and disclosing this prior relationship, it
3824 wasn't advertised within HHS that the -- to others involved
3825 in this campaign that Mr. Caputo had this prior
3826 relationship?

3827 A No. I mean, advertising, no. I wasn't -- I
3828 didn't run down the hall and tell somebody.

3829 Q It wasn't well known?

3830 A Yeah.

3831 [Exhibit 18 was identified
3832 for the record.]

3833 BY [MAJORITY COUNSEL].

3834 Q Okay. Let's move forward to Exhibit 18, if
3835 you would. And while you're scrolling there, I'll state
3836 for the record that this is an August 14, 2020 e-mail
3837 produced by Atlas. You are not on this e-mail, Mr. Weber,
3838 for your reference. In the e-mail we have Mark Chichester,

3839 who's the president of Atlas, e-mailing Vanessa Downes and
3840 another Atlas employee with the subject line, "FDA COVID
3841 subcontractor diligence."

3842 You'll see there in the first paragraph
3843 Mr. Chichester notes that he did some diligence on the subs
3844 and found little, in his words. And I'll direct you to the
3845 fourth paragraph there, Mr. Chichester writes, "Could find
3846 nothing at all on DD&T Group as a corporate entity, which I
3847 understand is an LLC platform owned by Den Tolmor, a
3848 Russia-born business associate of Caputo's who was a
3849 cofounder of the apparently defunct Bond Film Platform."

3850 So just as an initial matter, are you aware of
3851 whether Atlas raised this diligence with anyone in HHS?

3852 A No.

3853 Q And are you aware of whether Atlas ever
3854 expressed concerns about subcontracting with any of the
3855 preferred subcontractors?

3856 A No.

3857 Q Did he ever have any questions about why these
3858 subcontractors were identified?

3859 A No. I mean, the documentation was in the
3860 e-mail that sent the solicitation for proposals.

3861 Q Looking at Mr. Chichester's assessment here of
3862 DD&T Group, what was your opinion of the qualifications of
3863 DD&T for the performance they were asked to do under this

3864 contract?

3865 A So again, you know, after -- after talking
3866 with Michael about his relationship with Den Tolmor, or the
3867 alleged relationship he had, I -- like I said, I did some
3868 homework myself, looked into the films that he created.
3869 He -- at the time he -- this stands out in my mind -- was
3870 working on a documentary on Pope Francis with the Vatican.
3871 It was released around mid-September at that time.
3872 Incredibly compelling filmmaking.

3873 And so again, I'm like -- I didn't know Den Tolmor
3874 from any other Hollywood producer, but he did certainly
3875 seem to have the ability and credibility to come up with
3876 creative cinematography in a way that could engage
3877 individuals.

3878 Q And are you aware of anyone expressing any
3879 concerns about Mr. Tolmor or DD&T Group's lack of public
3880 health experience?

3881 A No.

3882 Q Did you find it unusual at all to rely on a
3883 subcontractor for filming public health campaigns who
3884 didn't have any public health experience?

3885 A No, we hire film crews all the time and
3886 directors to produce public service advertising that are
3887 not necessarily expertise in a particular topic. Their
3888 expertise is, in this particular case, cinematography, an

3889 ability to create a compelling visual that can relate to an
3890 audience.

3891 And so not having a public health background was not
3892 unusual to me at all. And again, it was my responsibility
3893 to make sure that the messages that were being recorded
3894 were scientifically accurate and consistent with the
3895 department's policy and the latest in the science. So no,
3896 I just -- I don't find that as strange.

3897 Q And sitting here today, how would you describe
3898 DD&T's performance under the contract?

3899 A I think -- so the challenge became the
3900 celebrities did not want to participate in the project. So
3901 DD&T, Atlas and others really didn't have an opportunity to
3902 perform. So to be a judge based on what they thought they
3903 were getting into and what actually happened, it would be
3904 difficult for me to draw a conclusion there.

3905 Q Okay. And you said that the celebrities
3906 didn't want to participate. Can you elaborate on that?

3907 A Yeah, sure. So as some of the news reports
3908 suggested, that this was actually an effort to reelect the
3909 President, again, quoting news, not project I was working
3910 on, and the celebrity -- some of the celebrity staff got
3911 wind of that. They did not want to -- and this is what I
3912 heard back through Atlas. I was not in contact with
3913 celebrities. It was the Atlas team that was responsible

3914 for contacting celebrities. And consistently, they were
3915 hearing, "We don't want to be part of this."

3916 And I will say the one conversation I had was with
3917 Dennis Quaid's manager, because after we filmed a video of
3918 Dennis Quaid and Dr. Fauci talking about coronavirus and
3919 things that people could do to mitigate the consequences
3920 and protect themselves, these news stories started to run
3921 and Dennis Quaid's manager was unhinged that the government
3922 was going to use Dennis Quaid to help reelect the
3923 President.

3924 No matter what I said to him, he was not going to
3925 listen. And they were very clear that they did not want to
3926 be part of the project. I expressed my disappointment. We
3927 wasted an hour of Dr. Fauci's time creating an incredible
3928 dialogue between a celebrity who had influence over a
3929 particular audience and that was wasted.

3930 We also wasted an hour of Dr. Adams' time, Jerome
3931 Adams, the then surgeon general, did a taping with an
3932 incredible session with CeCe Winans and the importance of
3933 the African-American community of taking important steps.
3934 Her team withdrew at that point in time and just the
3935 cascading after that, it was a consistent, "No, no, no, we
3936 don't want to be involved."

3937 Q And I think we're circle back on some more of
3938 that in a bit here.

3939 A Sure. Okay.

3940 Q Just going back to the documents, you'll see
3941 in the first paragraph again from Mr. Chichester, he
3942 describes all three of the subcontractors as, "Small shops
3943 with little on them in the public domain." And I know
3944 today you've been describing of how -- the enormity of this
3945 PR campaign, the massive amount of funds that were going to
3946 be put to it, the importance of this campaign.

3947 Did you find it at all unusual that the campaign
3948 would be relying on what Mr. Chichester describes as small
3949 shops with little track record?

3950 A So again, I would put this -- this is
3951 Mr. Chichester's opinion.

3952 Q Absolutely.

3953 A And he obviously made a business decision to
3954 compete for this award, which they received and ultimately
3955 would be responsible for delivering on. So I'm really not
3956 the one to judge the performance of these groups. I would
3957 say he would be. And he clearly made a decision to compete
3958 for the work and received the winning award.

3959 Q Are you aware of anyone in HHS or in Atlas
3960 Research other than this e-mail that expressed concerns
3961 about relying on the subcontractors for the PR campaign?

3962 A No.

3963 [Exhibit 15 was identified

3964 for the record.]

3965 BY [MAJORITY COUNSEL].

3966 Q Okay. Let's move to Exhibit 15. Going
3967 backwards here briefly.

3968 A Or I can do things concurrently.

3969 Q Thanks for staying with us.

3970 A No problem.

3971 Q This is -- while you're flipping to it, I'll
3972 say for the record, this is a document that was also
3973 produced by Atlas Research. The document is titled,
3974 "COVID-19 PSA and Awareness Campaign, Talent Procurement
3975 Methodology and Approach." It's dated September 8, 2020.

3976 Mr. Weber, are you familiar with this document?

3977 A I don't -- I don't recall it, but it certainly
3978 looks like the approach that we were working with.

3979 Q Okay. I'll direct you to the fourth slide in
3980 here, which is labeled, "Targeting and vetting talent, a
3981 data-driven approach." And I'll direct you to the third
3982 paragraph on this slide, which reads, "We will undergo an
3983 extensive research process to vet talent avoiding past or
3984 present scandals, strong political affiliations and/or
3985 negative publicity adhering to government guidelines and
3986 mandates."

3987 Mr. Weber, are you familiar with the vetting process
3988 that was used for the PR campaign?

3989 A Yes, very familiar. I provided Atlas
3990 directly -- actually through April, because again, April is
3991 the one who provides the task -- criteria for vetting
3992 individuals. And that is a process that ASPA had been
3993 using for years. So anything that went beyond that was not
3994 in the scope of the direction that we provided.

3995 Q Are you aware of vetting that went beyond that
3996 scope?

3997 A Yes, I am, as a result of the subcommittee's
3998 publication of a list of about 200 names. That list
3999 is -- that was the first time I ever saw that list.

4000 I was under the understanding that there was such a
4001 list, but I never saw that list until it was published by
4002 you all.

4003 Q And why did you have an understanding that
4004 there was such a list?

4005 A Again, conversations with Michael Caputo and
4006 his conversations with Den Tolmor. It's like they were
4007 talking about who might be able to participate, and so they
4008 came up with a list.

4009 Q So was Mr. Caputo involved in compiling that
4010 list?

4011 A I don't know for sure.

4012 Q Do you know who was involved in compiling that
4013 list?

4014 A I don't know for sure. I know -- I know Den
4015 was an architect of the list. Put it that way. I don't
4016 know who actually compiled it.

4017 [Exhibit 25 was identified
4018 for the record.]

4019 BY [MAJORITY COUNSEL].

4020 Q Okay. Why don't we go to the list actually.
4021 It should be Exhibit 25. And just to confirm here, I'm
4022 going to toggle over to it.

4023 I'll state for the record that this is a document
4024 that was produced by Atlas Research. The document is
4025 titled "PSA Celebrity Tracker," and it does contain a list
4026 of 274 public figures.

4027 Do you have the document in front of you, Mr. Weber?

4028 A Yes, I have it.

4029 Q So were -- to your knowledge, were these the
4030 celebrities that were under potential consideration for the
4031 PSA campaign?

4032 A I will say yes. I mean, some of the names on
4033 this list are names that I heard Michael Caputo talk about.

4034 Q Okay. And which names were those?

4035 A Definitely remember Beyoncé, Garth Brooks --

4036 Q I'll spare you from doing a line by line.

4037 A Yeah, burning up a lot of time here, but some
4038 of the names on here are familiar.

4039 Q Okay. Excellent. You mentioned Den Tolmor.
4040 Are you aware of anybody else who was involved in putting
4041 together this tracker?

4042 A No.

4043 Q And when you became aware of this tracker,
4044 what was your reaction?

4045 A The reaction was, okay, this is not consistent
4046 with the guidance that was provided to the contractor. I
4047 don't know where this came from. I need to find out where
4048 this came from. And a conversation with Michael Caputo
4049 was, look, you need to tell me what you're doing so that
4050 when questions come up, we have an awareness. And that is
4051 pretty much it. Of course it ensued in a number of media
4052 inquiries, responded to those media inquiries. Not me
4053 personally, I don't believe on this one, but through the
4054 spokeswoman for the department.

4055 Q You had conversations with Mr. Caputo about
4056 this document?

4057 A After I saw it, after you all published it.

4058 Q And what did you all discuss?

4059 A Number one, I explained to him I needed to
4060 know as executive sponsor of the campaign what it was he
4061 was talking about and what -- because a couple of things.
4062 I could help him try to achieve what he was working to
4063 accomplish in a way that was consistent with government

4064 operations, or I could advise him against it. Again, it's
4065 his choice to decide.

4066 And one of the things that really is important for me
4067 to state here, on a number of occasions, Michael Caputo
4068 said to me directly he did not care if these celebrities
4069 supported the President or not. The goal was to get
4070 individuals that resonated with particular communities. So
4071 I took him at his word around that.

4072 Q Okay. And how was this -- did he say anything
4073 else about this document in response once you brought it up
4074 to his attention?

4075 A No. And again, at this point in time, I'm
4076 just -- the celebrities were saying no, that Atlas was not
4077 getting traction. Already, you know, in my own head, it
4078 was like so how do we start formulating an approach to
4079 accomplish the goals of this public education campaign
4080 knowing -- knowing Fors Marsh was conducting market
4081 research and knowing that the concept of using celebrities
4082 to reach audiences was viable, it just was a tactical
4083 approach that didn't include, like, a comprehensive nature
4084 of work that was needed to get people into that behavior
4085 change mode that we talked about earlier.

4086 Q And how was this document used, to your
4087 knowledge?

4088 A I don't know. I do not know.

4089 Q Do you know if anyone in government ever
4090 reviewed this document?

4091 A I do not know. I did not review it.

4092 Q Okay. Let me ask you, the conversation with
4093 Mr. Caputo, you said it was after this was released. I
4094 believe this document was released by the committee -- or
4095 the committee in October and Mr. Caputo had taken a leave
4096 of absence in the middle of September. Did you often have
4097 discussions with Mr. Caputo during his leave of absence?

4098 A Not often, but I did have conversations with
4099 him. He would call, just sort of check in. And again, you
4100 know, his -- his leave of absence was a leave of absence
4101 and there was an expectation of his return initially
4102 December -- well, initially November, initially December.
4103 So it wasn't out of the realm of possibilities to have this
4104 conversation.

4105 Q So he continued to discuss the PR campaign
4106 with you during his leave?

4107 A Not -- again, not substantially. Just more of
4108 a how's it going and here's where we are and here's what's
4109 going on.

4110 Q Okay. Did he ever come back from his medical
4111 leave to HHS?

4112 A He did not.

4113 Q Okay. Just returning to the document here

4114 real quick, Exhibit 25, I think you noted that to your
4115 awareness, no one in government ever saw this document, is
4116 that right, or never reviewed it?

4117 A I did not.

4118 Q And the meeting notes that we looked at in
4119 Exhibit 14 previously, I'm happy to have you flip back to
4120 that -- and actually, I'll direct you to flip back to that,
4121 if you would be so kind.

4122 A Which --

4123 Q Exhibit 14. It's on the second page.

4124 A Exhibit 14.

4125 Q Right. And under the title "Progress," the
4126 last bullet there reads, "George Lopez PSA not moving
4127 forward due to previous concerns regarding his comments
4128 regarding the President."

4129 I'll ask you first, do you recall what this is in
4130 reference to?

4131 A So George Lopez -- I don't -- I don't
4132 recall -- I don't recall the issue being comments about the
4133 President. I do recall an issue about his reach, very
4134 small audience of individuals and it just wasn't really
4135 worth -- again, I believe I'm recalling this
4136 correctly -- it really wasn't worth all the energy and
4137 effort that went into producing a PSA with this particular
4138 celebrity who really didn't have much of a reach. And so

4139 the desire to pursue him, we ended it -- or we continued to
4140 say no, we weren't going to do this one.

4141 Q Okay. Do you recall this George Lopez PSA
4142 concept being discussed in this meeting?

4143 A Uh-huh. Yep.

4144 Q Now, I will say looking back at Exhibit 25,
4145 there is a reference to Mr. Lopez and it is on page 23 in
4146 the tracker. Why don't you flip there. And it's three up
4147 from the bottom. And in the additional notes section, it
4148 notes that controversial statements on President Trump in
4149 2020. Seems to be similar to what the meeting notes
4150 referenced that we just looked at?

4151 A Mm-hmm.

4152 Q Do you have any recollection of this document
4153 being used in that September 29, 2020 meeting?

4154 A No.

4155 Q Then you said before we talked about some of
4156 the vetting criteria. Looking at these additional notes
4157 here, there's a lot of references to then President Trump.
4158 And I'll actually turn to page 4 where we have a couple of
4159 celebrities, Mr. Downey, Jr., Ms. Lawrence, and their
4160 additional notes section notes that they are, "Not a Trump
4161 supporter."

4162 To your knowledge, was not supporting the President a
4163 consideration in the vetting process?

4164 A No. I provide very clear guidance about the
4165 things that people were to be vetted for, and that -- their
4166 support of the President was not one of those, or comments
4167 about the President or any current or past president. So
4168 that was not part of the government's requirement for
4169 vetting.

4170 And again, that's why when I saw this document, I
4171 was, like, this is very inconsistent with the guidance that
4172 we provided.

4173 Q Okay. And if -- if support for the President
4174 were considered, would that be an inappropriate criterion
4175 for the vetting process?

4176 A Yes, absolutely. And again, I'll restate,
4177 Michael Caputo said to me on a number of occasions he did
4178 not care if these celebrities supported the President or
4179 not and --

4180 Q Are you aware of whether --

4181 A I just -- I took him at his word. So --

4182 Q Are you aware of whether Mr. Caputo ever
4183 disregarded that, your clear guidance on how much to
4184 approach vetting?

4185 A I am not aware that he did or didn't.

4186 [Exhibit 28 was identified
4187 for the record.]

4188 BY [MAJORITY COUNSEL].

4189 Q Okay. I'll have you take a fast-forward to
4190 Exhibit 28 briefly. While you're getting there, I will
4191 state that this is a September 17, 2020 e-mail from
4192 Stefanie Lehmann of Atlas Research to April Brubach and
4193 Janell Muhammad. They attached the PSA celebrity
4194 participant tracker.

4195 So I know you had mentioned that you were not aware
4196 of anyone in government ever reviewing this. Does this
4197 refresh your recollection that this document was in the
4198 hands of the team lead as of September 17, 2020?

4199 A So the question I would have is what is your
4200 Exhibit 25? Is that exactly what was attached here?

4201 Q I can represent --

4202 A I don't know.

4203 Q Sure. Happy to represent to you that it's the
4204 same document produced to us that we were just looking at.

4205 A Okay. Fair enough.

4206 Q Did you ever have any conversations with
4207 Ms. Brubach about the document?

4208 A Not about the document, but again, in terms of
4209 conversations about vetting, what the criteria were. And,
4210 again, when a candidate -- a celebrity was put forward, the
4211 question always was how many and who does this celebrity
4212 influence? Is it worth the significant investment of
4213 resources and time of our top docs here at HHS to put

4214 together a PSA?

4215 Q Okay. Are you surprised to learn that a
4216 participant tracker was sent and you weren't receiving a
4217 copy of it?

4218 A No. No. I mean, it -- at that point in time,
4219 again, things that were -- would rise to the occasion of a
4220 conversation with me, I had -- I actually had daily
4221 meetings with the team, but they were talked about in
4222 general, you know, they have this -- there's a list of
4223 celebrities. These folks don't have reach. No one can
4224 justify why we would reach out to this individual. So that
4225 would be my involvement.

4226 Q Let's flip back --

4227 [Minority Counsel]. [Redacted] --

4228 [Majority Counsel]. Sorry, [Redacted].

4229 [Minority Counsel]. There's no, like -- there's no
4230 proof that this worksheet was the attachment. Do you have
4231 the original doc production that has this as the
4232 attachment?

4233 [Majority Counsel]. Yeah. We can send it over, the
4234 native file, yep.

4235 [Minority Counsel]. Both of the worksheets that are
4236 attached?

4237 [Majority Counsel]. Yeah, we have that production.

4238 Yep.

4239 [Minority Counsel]. Okay.

4240 [Majority Counsel]. Virtual -- virtual
4241 conversations, but yep.

4242 BY [MAJORITY COUNSEL].

4243 Q Mr. Weber, can we fast forward -- or sorry, go
4244 back to Exhibit 24, please?

4245 A Thank you.

4246 Q And while you're flipping there, I have just a
4247 couple of bigger picture questions. For the PSAs, what was
4248 the time period you were looking at to begin airing ads?

4249 A Again, that's back to as soon as possible.
4250 And the question that was raised often was when can we
4251 start filming PSAs? And the response I consistently
4252 provided was first we have to award a contract. After we
4253 award a contract, we have to have our initial meeting with
4254 the vendor, whoever that may be, and then we can start to
4255 produce PSAs.

4256 So the setup was pretty -- the setup was not
4257 complicated at all. It was -- the challenge with the
4258 celebrities really was getting agreement to do it and then
4259 finding a time that worked for both celebrity and both the
4260 doctor or, again, clinician from HHS to pair them up.

4261 Q Was there any particular timeline that was
4262 suggested to you by anyone involved in the campaign to
4263 begin airing the PSAs?

4264 A Just -- again, it was like as soon as you
4265 possibly can. And again, that was part of that pressure,
4266 it's like have to get a contract awarded, have to set up
4267 the financing mechanisms, the workflow.

4268 So realistically, it wasn't going to be
4269 until -- contract award -- maybe October at the earliest
4270 that we could get something videotaped and then you have to
4271 do the ad buys and purchasing. So it would be mid -- the
4272 most aggressive could be mid-October.

4273 Q Did HHS make any ad buys under this campaign?

4274 A No, not with celebrities. Not with
4275 celebrities. Remember -- so I went back, we did -- we did
4276 use the Atlas vehicle to buy some radio time for, again, a
4277 nationwide buy with the surgeon general, basic public
4278 health messaging.

4279 Q And how many PSAs were filmed under the Atlas
4280 contract?

4281 A I'll say two and a half. CeCe Winans, Dennis
4282 Quaid, and Rabbi Shulem out of New Jersey. We actually had
4283 a team heading up there for that. But no -- just the raw
4284 footage was done with the rabbi. The editing actually
4285 started with Dennis Quaid and editing actually started with
4286 CeCe Winans. So two and a half, if you will.

4287 Q And are you aware of anyone discussing any
4288 deliverables under the contract in the context of the 2020

4289 election?

4290 A No, that was not part of any conversation.

4291 [Exhibit 24 was identified

4292 for the record.]

4293 BY [MAJORITY COUNSEL].

4294 Q Okay. Looking at Exhibit 24 now, which I had
4295 keyed up for you. This is a document that was produced by
4296 Atlas. The document is entitled, "Review of BCW Draft
4297 Messaging Framework," and dated September 17, 2020. You'll
4298 see underneath there's a reference to a "Caputo/Weber call
4299 that could feed into the comm strategy and messaging."

4300 Are you familiar with the call that's being
4301 referenced here?

4302 A I actually think it was a meeting, an
4303 in-person meeting that we conducted. So given, again, time
4304 is of the essence in my mind around a public health
4305 emergency and having the ability to get messaging out,
4306 rather than setting up this meeting and that meeting, we
4307 just brought everybody together. Michael Caputo talked
4308 through his vision for what the campaign could be.

4309 Again, the very short version of that is identifying
4310 celebrities with particular audiences that they
4311 were -- could influence or they were influencers over,
4312 pairing them up with a public health professional, doctor
4313 or some credible health professional, to have a

4314 conversation about what COVID meant to the individuals and
4315 their families and things that people could do to protect
4316 themselves.

4317 Q Who else was in this meeting?

4318 A April Brubach, Mark Chichester was there,
4319 Michael Caputo, and a couple other folks from Atlas. I
4320 just can't remember. Yeah, I can't remember their names.

4321 Q Any subcontractors?

4322 A No. I'm looking around the room in my head
4323 right now. I do not remember subcontractors being there.

4324 Q Okay. In this document under the title
4325 "Soundbites/Taglines," we see a couple listed there, one of
4326 which is, "Helping the President will help the country."

4327 Who proposed this messaging?

4328 A I'm confident this is -- this is consistent
4329 with things that I heard Michael Caputo say. So I don't
4330 know who wrote this memo or where it came from, but it
4331 certainly seems like things that Michael Caputo would have
4332 said.

4333 Q Did Mr. Caputo reference the President when
4334 discussing the PR campaign?

4335 A Again, in the context of he said, I don't care
4336 if these celebrities support the President or not, and the
4337 importance was the campaign and the messaging.

4338 Q But also in the context of helping the

4339 President?

4340 A Not -- again, anything that would have been
4341 directly -- anything I would have had a conversation with
4342 him about, something like that, I would have said, Michael,
4343 I need to draw a line here. You're crossing it. That's
4344 not what I've signed up here to do.

4345 I have a pretty visceral reaction to that. And over
4346 32 years as I'd honed my skills of, okay, this is where I
4347 need to leave the room, draw a line, and we will carry on
4348 with or without me, and the conditions for Mark working on
4349 a campaign -- speaking of myself in the third person
4350 now -- pretty clear.

4351 Q Did any of you have any of those instances
4352 with Mr. Caputo?

4353 A Not -- again, not that I recall. He
4354 always -- he would always fall back on I don't care if they
4355 support the President or not.

4356 Q We also see under the "Soundbites/ Taglines"
4357 just above the one we just referenced, "Keep America well."
4358 This is similar phrasing as former President Trump's 2020
4359 reelection slogan "Keep America great."

4360 Who proposed this messaging?

4361 A I don't know.

4362 Q Would this be something consistent with the
4363 statements you heard Mr. Caputo make?

4364 A I really don't recall that one whatsoever.

4365 Q Do you recall anyone ever referencing the
4366 former President's campaign slogan in the context of
4367 messaging?

4368 A No.

4369 Q Are you aware of anyone expressing any
4370 concerns about any of the sound bites or tag lines that are
4371 referenced here?

4372 A So I don't recall any concerns about these.
4373 And the bottom line here is what would come out of the
4374 interviews with the celebrities would be reviewed by the
4375 participants in the interview, the content would be
4376 reviewed by the team of individuals that ASPA put together
4377 to make sure it is representing the latest science.

4378 None of these things are consistent with science or
4379 public health or -- you know, so what is conceptually
4380 messaging here is not consistent with how the project was
4381 being operationalized.

4382 Q Got it. So these messages here in your
4383 assessment were not supported by science?

4384 A These are not -- these are not messages about
4385 wearing masks or social distancing or vaccine hesitancy or
4386 what, again, the campaign produced around helping people
4387 understand how vaccines were produced and things like that.
4388 So no, this is inconsistent with public health messaging.

4389 Q Okay. So to your knowledge, there was no
4390 conversation regarding using PR campaign messaging to
4391 advance the former President's reelection prospects?

4392 A No.

4393 Q Do you recall a September 13, 2020 Facebook
4394 live video taken by Mr. Caputo in which he said the PR
4395 campaign was, quote, "demanded of me by the President of
4396 the United States personally"?

4397 A So I never watched that video. I don't know
4398 what was going through Michael Caputo's head, nor do I know
4399 who talked to him about the campaign or the work that was
4400 being done on it. So -- and as you know, shortly after
4401 that, he apologized for his remarks and took a leave of
4402 absence to address some health concerns.

4403 Q Is that something -- what Mr. Caputo said
4404 about the campaign being demanded by the President, is that
4405 something you had heard anyone to say prior to that video?

4406 A No.

4407 Q Subsequent to that video?

4408 A No.

4409 Q Do you have any reason to believe President
4410 Trump was receiving any information or updates about the PR
4411 campaign?

4412 A I wouldn't know.

4413 Q I will say in the video Mr. Caputo goes on to

4414 say that, and I'm paraphrasing slightly, that Democrats,
4415 now I'm quoting -- "cannot afford for us to have any good
4416 news before November because they're already losing." And
4417 he went on to say, "They're going to come after me because
4418 I'm going to be putting \$250 million worth of ads on the
4419 air."

4420 Was this the only time you heard Mr. Caputo refer to
4421 the PR campaign in the context of the 2020 election?

4422 A So again, I didn't watch the video, and I'm
4423 not a great believer of what I read in the press. And at
4424 the same time, I understand that is what he said, things
4425 along those lines in that video.

4426 And -- and my responsibility at that point in time,
4427 really -- again, I'm going to go back to the news media
4428 coverage of HHS, and ASPA in particular, was not very
4429 favorable. I had a team of people working on a campaign, I
4430 had an entire office staff that I was working with, and
4431 they didn't feel good about where they were working at this
4432 particular point.

4433 So I was spending a lot of my time with -- working
4434 with the team. It's like we have a public health mission
4435 here, in particular with the campaign. You know, again, it
4436 was like the conversation with CDC, you know me. I'm here
4437 focused on public health. We have a mission to do. I know
4438 it's difficult with all the noise going on in the

4439 background about what people might or might not be saying
4440 or the activities that are going on. And it's, like, I
4441 know you're at home. I know you're worried about your own
4442 families.

4443 So it was a -- the role that I have in this whole
4444 effort, again, executive sponsor. So April's managing the
4445 campaign. I'm managing, I will call it, the noise and
4446 making sure our team in ASPA sticks to mission, focuses on
4447 not only the public health work of COVID, but all the other
4448 important work that continued -- that continues today in
4449 the midst of the pandemic.

4450 So I have the deepest sympathies for Michael Caputo
4451 and the health issues he was going through, and at the same
4452 time managing, keeping the campaign moving forward because
4453 of the, again, vital national importance and
4454 helping -- having lots of conversations with our staff in
4455 ASPA who, again, going through their own personal family
4456 issues, COVID, keeping the work going, you know. And I
4457 mentioned -- and I'll stop here in a second -- keeping our
4458 studio open 24/7 because that was the vital link to the
4459 public for any urgent, immediate health communications
4460 coming out of HHS.

4461 So all of that was going on at that time. And again,
4462 deepest sympathies for Michael Caputo and what he was going
4463 through. My primary focus was ensuring the program was

4464 protected, that the staff were being heard -- I couldn't
4465 necessarily solve their problems -- and that this vital
4466 public health messaging campaign was executed.

4467 Q Okay. Since I know we're almost at time here,
4468 maybe one more question before we wrap. But we saw a PSA,
4469 saw the tracker that made reference to whether individuals
4470 supported President Trump. You looked at the meeting notes
4471 where there was messaging regarding helping the President
4472 and the President's -- allusion to the President's campaign
4473 slogan potentially, and we have the express statements of
4474 Mr. Caputo on September 13th regarding his intentions for
4475 the PR campaign.

4476 You have no reason to believe that Mr. Caputo was
4477 taking any steps to use the campaign for any political
4478 purposes?

4479 A I have no reason to believe he was. There was
4480 no indication from him to me directly that that was
4481 happening. And -- you know, and the bottom line, it
4482 stopped with me. So my responsibility was to, I'll say
4483 protect the messaging, ensure it was aligned with science,
4484 and that it was focused on providing the public -- the
4485 public with information they could use in terms of
4486 protecting themselves and mitigating COVID.

4487 So individuals can talk all they want, but April
4488 assigned work, April consulted with me, and nothing was

4489 ever produced that would suggest anything in terms of
4490 supporting a reelection campaign.

4491 Q Well, I think we're at our hour right now. I
4492 think we can take a break.

4493 [Majority Counsel]. Kevin, I have a couple more
4494 questions. I don't think they'll be terribly long.

4495 [Redacted], you know, defer to you all here on how
4496 you want to proceed.

4497 [Majority Counsel]. Well, my first question is just
4498 whether [Redacted] and the Minority have any questions at
4499 this point since an hour has elapsed. And if HHS is okay
4500 with us going forward, we can -- maybe we can just take,
4501 like, ten more minutes whenever they are all done.

4502 [Minority Counsel]. [Redacted], we have a few more
4503 questions. I mean, we'll leave it up to you guys how much
4504 time you have left.

4505 The Witness. Take a five-minute break.

4506 Mr. Barstow. Yeah, can we do a five-minute break?

4507 [Majority Counsel]. Let's take a break. Okay.

4508 [Recess.]

4509 [Majority Counsel]. We can go on the record and turn
4510 it over to you, [Redacted].

4511 BY [MINORITY COUNSEL].

4512 Q Okay. Mr. Weber, can we go back to Majority
4513 Exhibit 12? It's the letter to Chairman Krishnamoorthi

4514 from Sarah Arbes. On the last page -- let me know when
4515 you're there.

4516 A I am there.

4517 Q The first full paragraph on the last page, the
4518 last line says, "The work with members of the entertainment
4519 industry conducted by Atlas Research will not continue and
4520 the contract will be canceled."

4521 Is that accurate?

4522 A That is accurate.

4523 Q Do you know --

4524 A And the contract was canceled.

4525 Q Do you know -- and if you don't, it's
4526 okay -- do you know how much money was obligated out of the
4527 15 million prior to it being canceled?

4528 A You're going to force me to do reverse math,
4529 but 15.1 was awarded. I believe the department has
4530 received 12.5 back. So the money has -- we canceled it.
4531 So about 3 million --

4532 Q Okay. Is that --

4533 A -- if that makes sense.

4534 Q Yeah. Yeah. Is that 3 million -- was that
4535 owed to Atlas for work completed or is that in the process
4536 of being clawed back?

4537 A That was owed to Atlas for work completed,
4538 which included, again, a major national radio buy in terms

4539 of basic COVID public education materials. And the -- and
4540 another portion of that was for the video production of
4541 celebrity interviews with public health docs. And the
4542 money has been returned --

4543 Q Okay. So no money was suspended for work not
4544 completed?

4545 A Correct.

4546 Q Sorry. That was like a triple negative and
4547 I'm glad we all figured it out.

4548 A Sure. All right. Help me stay honest.

4549 Q Yes. So let's go to Majority Exhibit 25, the
4550 tracking document that we've talked about.

4551 Did you -- did you draft this document?

4552 A I did not.

4553 Q Did ASPA draft this document?

4554 A Again -- no.

4555 Q Did HHS draft this document?

4556 A No.

4557 Q When was the first time --

4558 A I --

4559 Q Go ahead.

4560 A I'll go with your question. When is the first
4561 time I became aware of it is when the subcommittee
4562 published it.

4563 Q Okay. Do you know who created the -- who

4564 created the Excel spreadsheet?

4565 A Again, it's -- my assumption is Den Tolmor
4566 working with Michael Caputo.

4567 Q Do you know who drafted -- who drafted the
4568 comments within the tracker?

4569 A I do not know who drafted the comments.

4570 Q Do you know if -- who or if anyone reviewed
4571 the document prior to it being sent to -- on September 17th
4572 to April and Janell?

4573 A I do not know.

4574 Q Do you know who, if anyone, approved the
4575 document within HHS?

4576 A The hesitancy here is if -- I don't know the
4577 specifics. What I do know is Atlas was provided specific
4578 instruction on how to vet celebrities. I gave
4579 that -- those instructions to April to deliver to Atlas. I
4580 know they were delivered.

4581 This document is inconsistent with that. So I would
4582 hope -- I do not know -- that the government would not pay
4583 for this as a final deliverable because it is inconsistent
4584 with the direction that was explicitly given on how to
4585 conduct vetting.

4586 Q So you explicitly gave Atlas, the contractor
4587 on this project, instructions on how to vet celebrities,
4588 and it would appear that they did not follow it, but also,

4589 that there was no interaction between HHS other than your
4590 explicit instructions?

4591 A That is correct.

4592 Q Do you have any -- we've kind of walked
4593 through this -- but do you have any direction knowledge of
4594 the creation of not only the tracker, but also Majority
4595 Exhibit 24, the messaging framework?

4596 A I don't know who created that. I was not
4597 involved in that, nor would I imagine any federal -- career
4598 federal staff being involved in that. Because, again, it's
4599 beyond the scope of a federal employee's role and
4600 responsibility. And again, had I seen any of these
4601 materials cross my desk, I would certainly have put a stop
4602 to it immediately.

4603 [Minority Counsel]. I think that's all I had. Thank
4604 you.

4605 [Majority Counsel]. All right. Thanks so much.

4606 Mr. Weber, Kevin, start with you, I think we should be
4607 able to get through these couple last questions in about 15
4608 minutes. Would that be all right?

4609 The Witness. All right. I'll keep my answers short.
4610 No long stories.

4611 [Majority Counsel]. Thank you so much. We
4612 appreciate it.

4613 BY [MAJORITY COUNSEL].

4614 Q Let's circle back. We were discussing
4615 Mr. Caputo took a medical leave shortly after the Facebook
4616 video that we've discussed. Do you recall Dr. Alexander
4617 also taking a leave -- or leaving entirely around this
4618 time?

4619 A I do remember that the services of
4620 Dr. Alexander were no longer required by the federal
4621 government and his employment was terminated.

4622 Q Do you recall the circumstances surrounding
4623 his termination?

4624 A I -- my only involvement in that was ensuring
4625 he did not have access to his e-mail or accounts or his
4626 government equipment. I do not know what was discussed
4627 with -- with Paul about why his employment was being ended.

4628 Q And did you have any understanding as to why
4629 his employment was being ended?

4630 A I do not.

4631 Q Do you have any reason to believe that
4632 Dr. Alexander continued to communicate with any government
4633 officials subsequent to his termination?

4634 A He has only communicated with me about
4635 benefits and maybe that was at most two e-mails, and I
4636 immediately referred him to HR.

4637 Q Okay.

4638 A And this was when employment is terminated,

4639 this is standard practice of collecting badges and
4640 government equipment and access to the building and things
4641 like that.

4642 Q Okay. So with respect to the PR campaign,
4643 we've discussed some documents today that you did not have
4644 any prior knowledge of until they were either released
4645 publicly or shown to you. So you were not privy to every
4646 conversation between Mr. Caputo and the subcontractors
4647 working on the PR campaign; is that correct?

4648 A That is correct. And I also -- to be very
4649 clear, I said to Michael Caputo directly, April Brubach is
4650 the only person who can assign work, approve work, and
4651 direct work of the contractors. I said to Michael, I'm
4652 like, you can have all the conversations you want with
4653 anybody you want. America is a free country. But April is
4654 the one who directs work.

4655 Q Are you aware of any instances where
4656 Mr. Caputo attempted to direct the work of the
4657 subcontractors?

4658 A We reminded him on occasion that April was the
4659 one who would direct work.

4660 Q So there were instances where he attempted to
4661 direct the subcontractors?

4662 A He had conversations and conversations could
4663 be interpreted as direction. But it is very clear who

4664 directed work, and that was April.

4665 Q We'll take that as a yes.

4666 So -- and then just circling back again, you weren't
4667 privy to every conversation between Mr. Caputo and some of
4668 the subcontractors. Is it safe to assume that you weren't
4669 privy to every conversation between Mr. Caputo and the
4670 prime contractors as well?

4671 A That is -- yes, I agree.

4672 Q So it is possible that Mr. Caputo issued
4673 instructions to either the subcontractors or the prime
4674 contractors without your knowledge?

4675 A It's possible.

4676 Q Let's just turn to what we had discussed
4677 previously, the strategic review that was ordered by
4678 Secretary Azar in October. Is that something
4679 he -- Secretary Azar testified before a subcommittee on
4680 October 2, 2020, and made reference to this strategic
4681 review. Were you involved in the strategic review process?

4682 A Absolutely, yes.

4683 Q And who else was on the review team?

4684 A So to be clear, you know, my role was to
4685 present what is, what could be, and to provide information
4686 to the review committee. The review committee was made up
4687 of, again, doctors, medical professionals from HHS as well
4688 as communications professionals. It included Dr. Fauci,

4689 Admiral Weahkee from the Indian Health Service,
4690 Dr. Felicia -- I'm blanking on her last name, who is the
4691 head of the Office of Minority Health. Anne
4692 Schuchat -- I'm trying to think. Seemed to be another
4693 couple of individuals. I can check.

4694 And then on the communications team, we had Katherine
4695 Lyon Daniel, who's the director of communications for CDC
4696 for eight years, and Bill Hall, and I think that pretty
4697 much rounds it out in terms of who was on that review
4698 group.

4699 Q Okay. And you were a part of that team?

4700 A Yeah. And again, my position in that review
4701 team was to -- a little bit of what we've done here today,
4702 present where the contracts were, what the intent was, the
4703 initial design of the campaign, and then to talk about what
4704 the statement of work included. So -- and then they made a
4705 recommendation back along with their comments about how to
4706 move forward or not. And so that's how that process
4707 worked.

4708 Q Okay. Do you know the criteria that the
4709 review team used to evaluate the contractors?

4710 A So there wasn't a -- there wasn't, like, a
4711 ten-point criteria. It wasn't like reviewing a contract.
4712 It was a discussion about, again, the contract mechanisms,
4713 what was currently in place, what was possible, and again,

4714 what they felt we should -- what we should do, HHS, moving
4715 forward.

4716 [Exhibit 26 was identified
4717 for the record.]

4718 BY [MAJORITY COUNSEL].

4719 Q Okay. For reference, Exhibit 26 is a copy of
4720 an interview you did with campaign U.S. on February 19,
4721 2021. I think on page 7 of the exhibit, you referenced
4722 that the review panel met on October 9, 2020, and you
4723 stated in the interview, "We determined that the celebrity
4724 component would not continue and we would go forward with
4725 the science-based approach built into the Fors Marsh Group
4726 contract from the beginning."

4727 So why did the review team decide to cancel the
4728 entire contract with Atlas?

4729 A So the sole focus on celebrities was
4730 just -- was not going to carry the weight that was needed
4731 in terms of public influence. So -- let me figure out
4732 another way of saying this.

4733 So celebrity influencers are a great way to
4734 communicate information to the public around important
4735 topics. Whether the public relates to that celebrity or
4736 not is in general really not going to be enough to convey
4737 public health information.

4738 So using celebrities as an amplifier is fine, but

4739 using celebrities as the primary focus is what was decided
4740 not to move forward. So again, sorry for not being so
4741 clear on this. But again, the primary -- initially, the
4742 primary focus was using celebrities in our PSA development,
4743 and the decision was made that that is not the way to move
4744 forward with the larger campaign.

4745 Q And did the review team conclude that the
4746 celebrity component, as you called it, was not science
4747 based?

4748 A So celebrity -- using celebrities is a good
4749 component of an overall communications campaign. Using
4750 celebrities alone is not enough to provide a public
4751 education campaign that would move audiences in a way that
4752 we needed to do around vaccine hesitancy.

4753 So it's sort of a reverse, if you will. As opposed
4754 to relying on celebrities 100 percent to be the deliverer
4755 of the message, we were going to use communication science
4756 and come up with a market research-based approach of what
4757 would motivate individuals to become -- to get vaccinated.
4758 And if a celebrity component would help contribute to that,
4759 we would use it.

4760 Q When you were having those department-wide
4761 consultations in September 2020 regarding the campaign
4762 materials, did anyone express any statements regarding
4763 whether a celebrity component was based in science or

4764 effective?

4765 A Department-wide conversation -- so again,
4766 that -- the e-mail from Caputo went out -- it was like
4767 September 9, September whatever, early September. The
4768 review group -- the official -- I'll call it the formal
4769 review group campaign materials really didn't get formed
4770 until the end of September, beginning of October. That is
4771 when the Secretary had the scientific review. So that
4772 committee, again, around mid-October really had its first
4773 chance to start engaging on what the campaign looked like.

4774 Q When you were --

4775 A And just to be really clear, I had -- I'll
4776 call it an informal review group of content that was put
4777 out prior to FMG messaging starting.

4778 Q Okay. And who is part of the informal group?

4779 A Again, we would consult with NIH, CDC, FDA,
4780 communications professionals to make sure they were getting
4781 to the scientists and the lawyers and all of those things.

4782 Q Got it. Got it. Okay. For the strategic
4783 review ordered by the Secretary, was the decision to cancel
4784 the Atlas contract unanimous?

4785 A So we didn't do a vote. It was sort of a
4786 consensus of the group. And the consensus of the group
4787 was, again, the importance of communications to any
4788 successful programmatic strategy in terms of COVID public

4789 education, the concept of focusing primarily on celebrities
4790 was deemed -- was just not going to be what it took to
4791 achieve that, and that the more rigorous scientific review
4792 process or communications science process that was outlined
4793 in the FMG program would be a viable option for moving
4794 forward.

4795 Q Were there any other reasons raised by this
4796 strategic review team for canceling the Atlas Research
4797 contract?

4798 A No, not that I'm aware of. You know, again,
4799 in most all of the funds that had been obligated to that
4800 contract were recouped by the government and could be used
4801 in additional places.

4802 Q And did anyone on the strategic review team
4803 express statements regarding any of the components of the
4804 campaign improperly influencing politics?

4805 A No. That was not any part of the
4806 conversation.

4807 [Majority Counsel]. Okay. Well, I think that does
4808 it for me. Anyone else in the Majority staff have any
4809 questions?

4810 [No response.]

4811 [Majority Counsel]. Mr. Weber -- sorry, our Minority
4812 staff friends, have to -- of course, turn it over to you
4813 all. We can take a break, of course, Mr. Weber, if you'd

4814 like. [Redacted], I'm not sure if you have any further
4815 questions.

4816 [Minority Counsel]. We're good.

4817 The Witness. Okay.

4818 [Majority Counsel]. I think that should do it then
4819 for today. So, Mr. Weber, I want to thank you very much
4820 for voluntarily participating today in this transcribed
4821 interview. We sincerely appreciate your time.

4822 The Witness. Yeah. And I appreciate you all looking
4823 into this and getting a better understanding of how the
4824 bureaucracy works to ensure that the best science is put
4825 forward to the public in, as I said, this unprecedented
4826 time.

4827 And the team here at HHS is incredibly proud of their
4828 work and we stand behind it. And again, the communication
4829 science that has been developed largely by this department
4830 is what was followed and continues to be followed to this
4831 day as we work to educate the public.

4832 So thank you for taking the time to get a better
4833 understanding and just -- that's it. Thank you.

4834 [Majority Counsel]. Okay. And with that, we can go
4835 off the record.

4836 [Whereupon, at 2:55 p.m., the taking of the interview
4837 ceased.]

Errata Sheet for the Transcribed Interview of Mr. Mark Weber
dated August 27, 2021

Page	Line	Change
16	353	CHANGE “Gaines” TO “Daines”
16	358	INSERT “to Senator Daines” AFTER “from the Administration”
23	531	INSERT “in the pandemic” AFTER “And at that time early on”
24	558	CHANGE “it would” TO “the message would”
24-25	564-565	STRIKE “So when agencies say – ASPA’s then –”
25	566	INSERT “with equity” AFTER “those agencies”
26	594	INSERT “to White House” AFTER “across town”
28	648	CHANGE “achieve” TO “Chief”
29	685	CHANGE “HHS” TO “ASPA”
34	808	INSERT “I am” AFTER “And again,”
41	979	CHANGE “he” TO “Dr. Alexander”
50	1214	CHANGE “Darn it.” TO “[Inaudible]”
77	1868	INSERT “aware” AFTER “No, just more”
87	2142	CHANGE “Gaines” TO “Daines”
89	2184	INSERT “Caputo” AFTER “was supporting Michael”
90	2193	CHANGE “Gaines” TO “Daines”
90	2203-04	STRIKE “again, it’s”
93	2280	INSERT “and” AFTER “we have services”
93	2281	CHANGE “applied” TO “supply”
95	2342	CHANGE “lead you into this” TO “read this to you”
102	2514	CHANGE “thing” TO “think”
108	2652	CHANGE “Gaines” TO “Daines”
109	2669	CHANGE “June” TO “July”
109	2670	CHANGE “June” TO “July”
110	2701	INSERT “through FMG” AFTER “the large 250 million”
110	2703	CHANGE “FMG” TO “Atlas”
116	2863	CHANGE “management” TO “innovation”
117	2871	INSERT “oversight” AFTER “eventually be having these”
124	3048	INSERT “of contact” AFTER “points”
135	3342	INSERT “I” BEFORE “crafted this statement”
136	3354	INSERT “I” BEFORE “drafted the statement of work”
138	3402	INSERT “I” AFTER “Again,”
140	3452-53	CHANGE “quantity and quality or whatever” TO “delivery indefinite quantity”
147	3637	CHANGE “Farr Act” TO “FAR”
148	3659	CHANGE “Farr Act” TO “FAR”
150	3693	CHANGE “Dan” TO “Den”
152	3748	CHANGE “Dan” TO “Den”; CHANGE “Dan” TO “Den”
190	4695	CHANGE “who’s” TO “who was”
191	4720	STRIKE “U.S.”