



DEPARTMENT OF HEALTH & HUMAN SERVICES

National Institute of Health
Bethesda, MD 20892

FINANCIAL HOLDINGS AND NON-DISCLOSURE STATEMENT

I acknowledge that I have been selected to participate in the performance of work under contract: 75N98019D00020/75N98020F00001 ("contract"). I certify that I will not knowingly disclose any protected Government information directly or indirectly to any person other than a person authorized by the Contracting Officer's Representative (COR) to receive such information. I understand that unauthorized disclosure of such information may subject me to substantial administrative, civil and criminal penalties, including fines, imprisonment, and loss of employment under applicable laws and regulations.

With respect to the financial holdings of my spouse, my dependent children, or members of my household, I represent that I am a contractor employee that is described in the Contract Addendum ("Addendum") of the contract, that I will abide by the terms of the Addendum, and that the information contained in Exhibit A and Exhibit B of such addendum is true and accurate, to the best of my knowledge.

I further affirm that in the event that any business entity, in which I, or a member of my family or household, have holdings, financial interest, or an employment relationship, of whatever nature and to whatever extent, submits information that is relevant to my performance of work under this contract that I will notify the contractor and the CO in writing.

I certify that I will not discuss with, or reveal to, any representative of any business organization or other entity, or any individual person (except persons specifically authorized to receive such information) either within or without the United States Government, any aspects of the work performed, except as authorized by the Government. I acknowledge that the unauthorized release of information as defined herein may result in the termination of my participation under this contract. In the event I release any of the information covered hereby, I agree to so advise the contractor and the CO as soon as practicable.

Printed Name: RACHEL HARRIGAN

Signature: *Rachel Harrigan*

Position: CONSULTANT

Organization: _____

Date: MAY 28TH 2020

Attachments:

- Addendum to Financial Holdings and Non Disclosure Statement
- Exhibit A
- Exhibit B



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EXHIBIT A – BOARD MEMBER AFFILIATION

I certify that I am a member to the following Boards, which may be involved in developing or manufacturing of vaccines, therapeutic and diagnostic products to combat pandemic COVID-19:

- 1- None
- 2-
- 3-
- 4-
- 5-
- 6-

Initial & Date: RHH MAY 28TH 2020
Printed Name: RACHEL HARRIGAN



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EXHIBIT B – VESTED SECURITIES

I certify that I own securities in the following pharmaceutical or other companies that are involved in vaccines, therapeutics and diagnostic products developed to combat pandemic COVID-19:

- 1- None
- 2-
- 3-

I certify that I own securities in the following pharmaceutical and health related companies that the Government has determined are not involved in vaccines, therapeutics and diagnostic products developed to combat pandemic COVID-19 or are otherwise not related to my performance of work under this contract. These holdings are disclosed to the Government for informational purposes and are not subject to the terms of the contract addendum:

- 1- Pfizer, Inc.
- 2- Acadia Pharmaceuticals Inc.
- 3- PhaseBio Pharmaceuticals Inc.
- 4- Incyte Corp.
- 5- Karuna Therapeutics Inc.
- 6- Lyndra Therapeutics
- 7- Zoetis Inc.

Initial & Date: RWH MAY 28TH 2020

Printed Name: RACHEL HARRIGAN