

Truth in Testimony Disclosure Form

In accordance with Rule XI, clause 2(g)(5)* of the *Rules of the House of Representatives*, witnesses are asked to disclose the following information. Please complete this form electronically by filling in the provided blanks.

Committee: _____

Subcommittee: _____

Hearing Date: _____

Hearing :

Witness Name: _____

Position/Title: _____

Witness Type: Governmental Non-governmental

Are you representing yourself or an organization? Self Organization

If you are representing an organization, please list what entity or entities you are representing:

FOR WITNESSES APPEARING IN A NON-GOVERNMENTAL CAPACITY

Please complete the following fields. If necessary, attach additional sheet(s) to provide more information.

Are you a fiduciary—including, but not limited to, a director, officer, advisor, or resident agent—of any organization or entity that has an interest in the subject matter of the hearing? If so, please list the name of the organization(s) or entities.

Please list any federal grants or contracts (including subgrants or subcontracts) related to the hearing's subject matter that you or the organization(s) you represent have received in the past thirty-six months from the date of the hearing. Include the source and amount of each grant or contract.

Please list any contracts, grants, or payments originating with a foreign government and related to the hearing's subject that you or the organization(s) you represent have received in the past thirty-six months from the date of the hearing. Include the amount and country of origin of each contract or payment.

Please complete the following fields. If necessary, attach additional sheet(s) to provide more information.

- I have attached a written statement of proposed testimony.
- I have attached my curriculum vitae or biography.

* Rule XI, clause 2(g)(5), of the U.S. House of Representatives provides:

(5)(A) Each committee shall, to the greatest extent practicable, require witnesses who appear before it to submit in advance written statements of proposed testimony and to limit their initial presentations to the committee to brief summaries thereof.

(B) In the case of a witness appearing in a non-governmental capacity, a written statement of proposed testimony shall include— (i) a curriculum vitae; (ii) a disclosure of any Federal grants or contracts, or contracts, grants, or payments originating with a foreign government, received during the past 36 months by the witness or by an entity represented by the witness and related to the subject matter of the hearing; and (iii) a disclosure of whether the witness is a fiduciary (including, but not limited to, a director, officer, advisor, or resident agent) of any organization or entity that has an interest in the subject matter of the hearing.

(C) The disclosure referred to in subdivision (B)(ii) shall include— (i) the amount and source of each Federal grant (or subgrant thereof) or contract (or subcontract thereof) related to the subject matter of the hearing; and (ii) the amount and country of origin of any payment or contract related to the subject matter of the hearing originating with a foreign government.

(D) Such statements, with appropriate redactions to protect the privacy or security of the witness, shall be made publicly available in electronic form 24 hours before the witness appears to the extent practicable, but not later than one day after the witness appears.

False Statements Certification

Knowingly providing material false information to this committee/subcommittee, or knowingly concealing material information from this committee/subcommittee, is a crime (18 U.S.C. § 1001). This form will be made part of the hearing record.



Witness signature

Date



Seattle Indian Health Board
For the Love of Native People
611 12th Avenue South
Seattle, WA 98144
(206) 324-9360
www.sihb.org

Indian Health Service Funding		
Project Name	Award	End Date
051-22 – IHS SDPI Diabetes 2022 (051-22)	351,001.00	12/31/2022
051-23 – IHS SDPI Diabetes 2023 (051-23)	351,001.00	12/31/2023
051-24 – IHS SDPI Diabetes 2023 (051-24)	351,001.00	12/31/2024
078-20D – IHS COVID MOD3 (078-20D)	3,168,183.00	9/30/2024
078-20H – IHS Portland MOD 8 (078-20H-)	624,717.00	9/30/2024
078-20K – IHS Portland MOD 11 (078-20K)	95,638.00	9/30/2023
078-23 – IHS Portland Urban 2023 (078-23)	5,544,128.00	9/30/2023
078-23A – IHS HIV (078-23A)	198,590.00	8/31/2023
078-23B – IHS MOD 20 Testing (078-23B)	196,347.00	9/30/2024
078-24 – IHS Portland Urban 2024 (078-24)	5,515,328.00	9/30/2024
078-24A – IHS HIV (078-24A)	207,733.00	8/31/2024
078-24C – IHS Dementia (078-24C)	199,880.00	8/31/2024
081-22 – IHS UIHP 4-in-1	645,595.00	3/31/2023
081-23 – IHS UIHP 4-in-1 (081-23)	762,060.00	3/31/2024
081-24 – IHS UIHP 4-in-1 (081-24)	703,813.00	3/31/2025
178-23 – IHS ARPA (178-23)	25,242,229.00	9/27/2026
Total	44,157,244.00	