

United States House of Representatives
Committee on Foreign Affairs

"TRUTH IN TESTIMONY" DISCLOSURE FORM

Clause 2(g) of rule XI of the Rules of the House of Representatives and the Rules of the Committee require the disclosure of the following information. A copy of this form should be attached to your written testimony and will be made publicly available in electronic format, as required by House rules.

1. Date of Hearing: *November 29, 2017*
2. Your Name: *Michael Splaine*
3. Organization or organizations you are representing:
Splaine Consulting, Alzheimer's Disease International
4. Since January 1, 2013, have you or your organization(s) received any Federal grants or contracts (including subgrants and subcontracts) related to the subject of the hearing or your representational capacity at the hearing? Yes No (select one)
5. Since January 1, 2013, have you or your organization(s) received any contract or payment originating with a foreign government related to the subject of the hearing or your representational capacity at the hearing? Yes No (select one)
6. If you answered "Yes" to either item 4 or 5, list the source and amount of each grant, contract, or payment. You may list additional grants, contracts, or payments on additional sheets.
2015-2016: Subcontract, National Center on Elder Abuse ACL grant, \$21,000
2013-present: Subcontract, CDC/Alzheimer's Association Healthy Brain Initiative, \$72,000 per annum
7. Are you an active registrant under the Foreign Agents Registration Act (FARA)?
 Yes No (select one)

Signature: _____

[Handwritten Signature] *11/29/2017*

Please attach a copy of this form to your written testimony.