Committee on Science, Space, and Technology

U.S. House of Representatives

Witness Disclosure Requirement - "Truth in Testimony"
Required by House Rule XI. Clause 2(g)(5)

| 1. Your Name: RICHARD B. BELZER | | |
|---|---|--------|
| 2. Are you testifying on behalf of the Federal, or a State or local government entity? | Yes | No × |
| 3. Are you testifying on behalf of an entity that is not a government entity? | Yes | No × |
| 4. Other than yourself, please list which entity or entities you are repr | esenting: | |
| 5. Please list any Federal grants, cooperative agreements, or contracts subgrants or subcontracts) that you or the entity you represent hav after December 31, 2015: | | n or |
| None. | | |
| 6. Please list any foreign government payments that <u>you or the entity y</u> <u>received</u> on or after December 31, 2015: | ou represen | t have |
| None. | | |
| 7. If your answer to the question in item 3 in this form is "yes," please of position or representational capacity with the entity(ies) you are represented to the control of the control | - | ır |
| | | |
| 8. If your answer to the question in item 3 is "yes," do any of the entities disclosed in item 4 have parent organizations, subsidiaries, or partnerships that you are not representing in your testimony? | Yes | No |
| 9. If the answer to the question in item 3 is "yes," please list any Federa cooperative agreements, or contracts (including subgrants or subcoreceived by the entities listed under the question in item 4 on or after 2015, that exceed 10 percent of the revenue of the entities in the year including the source and amount of each grant or contract to be list. | ontracts) tha er Decembe ar received, | |
| | | |

I certify that the above information is true and correct.

Signature:

Date: 9/7/18

False Statements Act Certification

You are specifically advised that providing false information to this Committee/Subcommittee, or concealing material information from this Committee/Subcommittee, is a crime, and you can be punished for that. If you acknowledge this, please sign the bottom of this form and return to the Committee. This form will be made part of the hearing record.

Witness signature

Date