




HOUSE COMMITTEE ON SMALL BUSINESS  
Witness Disclosure Statement Required by House Rule XI, Clause 2(g)

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |     |                                        |
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| 1. Your name:<br>JOAN FALLON                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |     |                                        |
| 2. Are you testifying on behalf of a federal, state, or local government entity?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | YES | NO <input checked="" type="checkbox"/> |
| 3. Are you testifying on behalf of an entity other than a government entity?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | YES | NO <input checked="" type="checkbox"/> |
| 4. Other than yourself, please list the entity or entities you are representing:<br>CUREMARK                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |     |                                        |
| 5. Please list any offices or elected positions held or briefly describe your representational capacity with the entities disclosed in question 3.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |     |                                        |
| 6. a) Please list any federal grants or contracts (including subgrants or subcontracts), including the amount and source (agency) which you or the entities you represent have received and/or have been approved for during the current calendar year or either of the previous two calendar years that are related to the subject matter of the hearing:<br><br>b) Please list any federal grants or contracts (including subgrants or subcontracts) and the amount and source (agency) received by the <u>entities listed under question 4</u> during the current calendar year or either of the two previous calendar years which exceeded 10% of the entities' revenues in the year received:<br><br>c) Please list the amount and country of origin of any payment or contract related to the subject matter of the hearing originating with a foreign government which you have received during the current calendar year or either of the previous two calendar years that are related to the subject matter of the hearing: |     |                                        |
| 7. If you are testifying on behalf of a non-governmental entity, does it have a parent organization or an affiliate that you do not specifically represent? If so, please list below:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | YES | NO <input checked="" type="checkbox"/> |

NOTE: Under House Rule XI, Clause 2(g)(5), this form must be posted on the Committee's website not later than one day after the witness appears. Appropriate redactions may be made if, in the Committee's view, they are necessary to protect the privacy or security of the witness. Please notify the Committee's Clerk if you believe such redactions are necessary.

Signature: 

Date: 5/11/18