Please be sure to provide an answer for every question even if the answer is N/A

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: Education and Labor	
Subcommittee: Health, Employment, Labor, and Pensions	
Hearing Date: September 26, 2019	
Hearing Subject:	
"Making Health Care More Affordable: Lowering Drug Prices and Increasing Transpare	ency"
Witness Name: Bari Talente	- 4
Position/Title: Executive Vice President of Advocacy	
Witness Type: O Governmental Non-governmental	
Are you representing yourself or an organization? O Self Organization	
If you are representing an organization, please list what entity or entities you are representing:	
National Multiple Sclerosis Society	
If you are a <u>non-governmental witness</u> , please list any federal grants or contracts (including subgrasubcontracts) related to the hearing's subject matter that you or the organization(s) you represent a hearing received in the current calendar year and previous two calendar years. Include the source a amount of each grant or contract . If necessary, attach additional sheet(s) to provide more information.	at this
ΝΙΔ	
N / I	
If you are a <u>non-governmental witness</u> , please list any contracts or payments originating with a for government and related to the hearing's subject matter that you or the organization(s) you represent hearing received in the current year and previous two calendar years. Include the amount and courigin of each contract or payment. <i>If necessary, attach additional sheet(s) to provide more information.</i>	ent at this
NA	