

## Certification of disclosure

By attaching this document with my signature to the disclosure and submitting the disclosure, I certify that:

1. The information I have provided in this form is accurate and complete to the best of my ability.
2. I am aware that I am subject to Uppsala University's policy regarding financial conflict of interest in applications to and awards from federal American agencies (dnr UFV 2021/1302), presented at: <https://regler.uu.se/dokument/?contentId=889174>
3. I acknowledge my responsibility to immediately disclose any new significant financial interest obtained during the term of the award (no later than 30 days after discovering or acquiring the interest).
4. If I am submitting this disclosure in regard to *granted* NIH-research (i.e., not only in regard to an application), I have completed this NIH tutorial prior to engaging in the NIH-funded research, and every four years thereafter, as long as I am involved in NIH-funded research: <http://grants.nih.gov/grants/policy/coi/tutorial2011/fcoi.htm>

Name:	Signature:	Date:
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