

# Declaration of Conflict of Interest

## Disclosure Statement

Board of Directors (BOD) members who have a financial relationship with or are affiliated with companies or organizations about whose products or services they are reporting must disclose this information. If you, as a BOD member, have such an affiliation or financial relationship, a disclosure statement must be made publicly available on the CCIC website. The intent of this policy is not to prevent an individual from taking a leadership role in the organization; it is intended that any relationship should be identified openly so that all may form their own judgments about the CCIC with the full disclosure of the facts.

| <input type="checkbox"/> <b>I do not have a relationship with a for-profit and/or a not-for-profit organization to disclose</b>   |   |   |
|---|---|---|
| <input checked="" type="checkbox"/> <b>I have a relationship with a for-profit and/or a not-for-profit organization to disclose</b><br>Please indicate the organization(s) with which you have/had a relationship over the previous two years and briefly describe the nature of that relationship. |   |   |
| Nature of relationship(s)   | Name of for-profit or not-for-profit organization(s)          | Description of relationship(s)                                |
| Any direct financial payments including receipt of honoraria  | Tilray, Cannimed  | Honoraria for delivering a CME Event that I developed         |
| Membership on advisory boards or speakers' bureaus  | Tidal, Spectrum, IPSEN, MTPA                                  | Member of scientific and research and clinical advisory board |
| Funded grants or clinical trials  | Cytokinetics, Orion, RHI, ALS Canada, Mallinrodt, NBHRF, CNDN | Clinical trials in ALS, registry trials in ALS, NMD and SCI   |
| Patents on a drug, product or device  | none  | none  |
| All other investments or relationships that could be seen by a reasonable, well-informed participant as having the potential to influence the content of the educational activity   | Click here to enter text.                                     | Click here to enter text.                                     |
| <input checked="" type="checkbox"/> <b>I Agree</b> By clicking "I agree" you are acknowledging that the above information is accurate and that you understand that this information will be publicly available.   |   |   |
| Name:   | Colleen O'Connell   | Date: 05/03/2019  |