Have you or any member of your immediate family (spouse and/or dependent children) ever:

选择No（打勾或打×也可）

|  |  |  |  |
| --- | --- | --- | --- |
| **NO** | **YES** | 横线上不用填写 | |
|  |  | 1) Owned or entered into an agreement to own a proprietary interest in the Johnson & Johnson (China) Investment Ltdproduct, drug or device which is the subject of the Clinical Trial (e.g., patent, trademark, copyright, licensing agreement and/or royalty arrangement, etc.) ? *If YES,* *please describe:* | |
|  |  | |  |
|  |  | 2) Entered into any financial arrangement with Johnson & Johnson (China) Investment Ltd whereby the value of your compensation for conducting the Clinical Trial could be influenced by the outcome of the Clinical Trial? *If YES, please describe:* | |
|  |  | |  |
|  |  | 3) Received, or entered into an agreement to receive,payments, grants, and/or equipment (e.g., grants to fund ongoing research, retainers or payments for ongoing consulting services, compensation in the form of equipment, honoraria, etc*.*)from Johnson & Johnson (China) Investment Ltd (including payments to an institution to support your activities) during the time you were carrying out the Clinical Trial and for one year after completion of the Clinical Trial having a total monetary value exceeding USD $25,000 (exclusive of the costs of conducting the Clinical Trial or any other clinical study and exclusive of payments made prior to February 2, 1999)? *If YES,* *please describe the nature and amount(s) of any such payments, equipment and/or grants):* | |
|  |  | |  |
|  |  | 4) Owned or entered into an agreement to own, an equity interest in Johnson & Johnson (China) Investment Ltd (e.g.,stock and/or stock options)during the time you were carrying out the Clinical Trial and for one year after completion of the Clinical Trial that exceeds USD $50,000.00 in value or has a value that cannot be readily determined by reference to public prices? *If YES, please describe:*  日期（授权当天）  研究人员姓名（英文拼音） | |
|  |  | |  |

By signing below, you certify that the above information is complete and accurate, and you agree to promptly update the above information in accordance with 21 CFR §312.64(d) or 21 CFR §812.110(d) if any relevant changes occur to your answers during the Clinical Trial or within one year after its completion.

|  |  |  |
| --- | --- | --- |
| Your Signature: |  | Date (Please enter date as DD/Mmm/YYYY) |
|  |  |  |