APSARD
AMERICAN PROFESSIONAL SOCIETY OF ADHD AND RELATED DISORDERS

2016 Conflict of Interest Disclosure Form

Please identify conflicts of interest during the past year. All questions need to be answered.

1. Do you or your spouse combined have an equity interest such as ownership interest, stock options (excluding mutual funds), or any other equity interest in a commercial business in the health care field? If yes, please describe in detail.
   Yes X No____
   HOLD STOCK IN ELI LILLY AND COMPANY
   RETIREE OF ELI LILLY AND COMPANY – RECEIVE A PENSION

2. Have you or your spouse received payments for compensation for advisory board participation, consultation with any commercial business in the health care field, speakers bureau participation, grants to fund research? If yes, please explain.
   Yes X No____

   Advisory Board – list each company:
   NA

   Consultation – list each company
   THERAVANCE
   NEUROVANCE

   Speakers Bureau – list each company:
   NA

   Research Grants – list each company:
   NA

Date: 02.15.2016

Signature: John N Heiligenstein