

pCODR Patient Advocacy Group Conflict of Interest Declarations

gro Na	oup:	registered pati		-	Multiple Myeloma Canada daratumumab
To revany infinor	mainta view pro y poten ormation	ocess must disc tial conflicts of on submitted. (e or preclude t	rity ar close a f inte Conflic he use	nd credibility of any conflicts of rest that may ir ct of interest do e of the patient	the pCODR process, all participants in the pCODR interest. Patient advocacy groups must declare ifluence or have the appearance of influencing the eclaration is requested for transparency — it does advocacy group input. are not limited to:
	ho • aff	noraria, gifts, a	and sa	alary;	tical industry e.g., educational or research grants, relationships with drug manufacturers or other
Se	ction A	: Payment Red	eived	d	
1.	any co review □	mpany or orga	nizati	on that may ha	any payments over the previous two years from we direct or indirect interest in the drug under
2.	What 1	Operating Funds Royalties	\boxtimes	Program Fundi website) Research/educ grants	ational
		Gifts Honoraria		Sponsorship of Other, please s	

Please provide the names of companies and organizations and the amounts of the payments in the box below.

For the last fiscal year (2014 and 2015) revenue source have come from the following companies: Amgen, Bristol-Myers Squibb, Celgene, Janssen, Karyopharm, Lundbeck, Novartis, Onyx, Otsuka, Sanofi, Takeda and The Binding Site. Some funding referred to above as received by the corporation is subject to confidentiality provisions in the agreements governing the funding.

Source of funding	Total	Percentage
Janssen	\$	5.5%
Other pharma	\$	48.7%
Non related pharma	\$	45.8%
TOTAL	\$	
TOTAL	Φ	<u>_</u>

Section B: Holdings or Other Interests

Has this patient advocacy group received or is it in possession of stocks or options of more than \$10,000 (excluding mutual funds) for organizations that may have a direct or indirect interest in the drug under review? If yes, please list in the table below.

NO

Section C: Affiliations, personal or commercial relationships

Hardine Glias

Does this patient advocacy group have personal or commercial relationships either with a drug or health technology manufacturer (including such manufacturer's parent corporation, subsidiaries, affiliates and associated corporations) or other interest groups? If yes, please provide the names of the companies and organizations and outline the nature of these relationships in the table below.



I hereby certify that I have authority to disclose all relevant information with respect to any matter involving this patient advocacy group with a company, organization or entity that may place this patient advocacy group in a real, potential or perceived conflict of interest situation.

Date: May 3rd 2016

Name: Martine Elias

Signature: