

COI Certification Template
8.23.2012

Date

Conflicts of Interest Review Committee
One Brookings Drive
Campus Box 1054
St. Louis, MO 63130

Grant Title and/or Grant Number: _____; WU PI: _____

This letter certifies (name of individual) is compliant with (name of institution) research conflicts of interest policies. Our institutional conflicts of interest policies comply with the Department of Health and Human Services, "Objectivity in Research", 42 CFR Part 50 and "Responsible Prospective Contractors", 45 CFR Part 94 requirements.

Signature of either the Institutional Official or COI Committee chair