

Committee on Ways and Means
 Witness Disclosure Requirement – “Truth in Testimony”
 Required by House Rule XI, Clause 2(g)

Your Name: Eric L. Bellamy		
1. Are you testifying on behalf of a Federal, State, or Local Government entity? a. Name of entity(ies). b. Briefly describe the capacity in which you represent this entity.	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
2. Are you testifying on behalf of any non-governmental entity(ies)? a. Name of entity(ies). Children’s Trust of South Carolina b. Briefly describe the capacity in which you represent this entity. Home Visiting Manager, Programs	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
3. Please list any Federal grants or contracts (including subgrants or subcontracts) which you have received during the current fiscal year or either of the two previous fiscal years that are related to the subject matter of the hearing: FY17 - \$0 received FY16 – HRSA MIECHV X10MC29503 - 04/01/16-09/30/18 \$8,388,323 FY15 – HRSA MIECHV X02MC28246 - 03/01/15-09/30/17 \$2,001,954 HRSA MIECHV D89MC28260 – 03/01/15-09/30/17 \$6,492,893		
4. Please list any grants, contracts, or payments originating from foreign governments which you have received during the current calendar year or either of the two previous calendar years that are related to the subject matter of the hearing: N/A		
5. Please list any offices or elected positions you hold. N/A		
6. Does the entity(ies) you represent, other than yourself, have parent organizations, subsidiaries, or partnerships you are not representing?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
7. Please list any Federal grants or contracts (including subgrants or subcontracts) which were received by the entity(ies) you represent during the current fiscal year or either of the two previous fiscal years, which exceed 10 percent of entity(ies) revenues in the year received. Include the source and amount of each grant or contract. Attach a second page if necessary. FY17 - \$0 received FY16 – HRSA MIECHV X10MC29503 - 04/01/16-09/30/18 \$8,388,323 - HHS OAHS SP1AH000030-04 - 08/01/16-07/31/16 \$1,466,400 FY15 – HRSA MIECHV X02MC28246 - 03/01/15-09/30/17 \$2,001,954 - HRSA MIECHV D89MC28260 – 03/01/15-09/30/17 \$6,492,893 - HHS OAHS SP1AH000030-02 - 08/01/14-07/31/15 \$1,500,000		

8. Please list any grants, contracts, or payments originating from foreign governments which were received by the entity(ies) you represent during the current fiscal year or either of the two previous fiscal years related to the subject matter of the hearing. Include the source and amount of each grant or contract. Attach a second page if necessary.