FOIA Number: 2018-0764-F

FOIA MARKER

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Admin - Counsel Speaker's Agreement

Stack:	Row:	Section:	Shelf:	Position:
S	66	6	11	3

Sample -- Authorization to Publish, Record, or Reproduce Staff Speeches (to be used in lieu of copyright or similar form).

Dear [Name] :

As you requested, I authorize the [name], its successors and assigns, and anyone acting on its authority to record my entire presentation, including my likeness, voice, and statements, on film, videotape, audiotape, or any similar medium; to edit such recording, so long as such editing does not in any manner alter or distort the meaning of my statements; to incorporate the same into one or more educational programs and materials (including brochures, study guides and curriculum materials). This authorization is given provided that the inclusion of my official title and position be given no more prominence than other biographical details.

I authorize [name] to reproduce, distribute, exhibit and otherwise use or authorize the use of such program or any portion thereof, prepared in accordance with the limits detailed above, for educational purposes at any time or place or in any manner. My presentation, as the work of a federal government employee as part of my official duties, is in the public domain under 17 U. S. C. §§ 101, 105. Therefore, my authorization is given with the understanding that [name] will make copies of publications or recordings of my remarks available free or at cost to anyone who requests them. To the extent my remarks are subject to copyright, I grant [name] such rights, if any, as I may have in such copyright and release [name] and others authorized by [name] from such claims, liabilities, and expenses that I now have or may hereafter have by reason of such use.

The Office of National AIDS Policy and I reserve the right to utilize my statements and biographical information in any manner, including in connection with other conferences and educational programs, to reproduce, prepare derivative works, distribute copies to the public, and perform and display the same publicly by or on behalf of the Federal Government or the Office of National AIDS Policy, as the case may be.

Sincerely,

NYMAN CAFARELLI

Public Relations & Marketing

To: Sarah Holewinski

From: Barbara Busby

Date: 4/29/98

Fax number: 202 - 456 - 2439

Number of pages including this page: 2

Message: Thanks for all your help Sarah!

TO BARBARA BUSBY

If you encounter any problem during transmission please call 310 274-7800. Thank you.

9171 Wilshire Boulevard Penthouse Suite Beverly Hills, California 90210-5530 Tel:310 274-7800 Fax:310 274-7838

Bragman
Nyman
Cafarelli
Public Relations & Marketing
BEVERLY HILLS–An innovative, [illegible]
company with a wide range of clie[illegible]
with the [illegible]

For Sandra Thurman:

Tanqueray's American AIDS Rides
Rider Consent and Release Form

On this Consent and Release, I hereby give ***Tanqueray's American AIDS Rides*** or anyone authorized by ***Tanqueray's American AIDS Rides*** permission to use any photograph or biography.

I agree that ***Tanqueray's American AIDS Rides*** has unrestricted use of my photograph or biography for purposes of publicity, advertising and promotion and to use my name, likeness, biographic or other information in connection therewith. I further agree to indemnify *Tanqueray's American AIDS Rides*, its licensees, agents, successors and assign from any and all claims and liability for damages, losses, or expenses of any sort arising from the making and use of such photographs, biographies.

I further acknowledge that, ***Tanqueray's American AIDS Rides*** owns all right to those photographs, biographies irrespective of the form in which they are produced or used, together with the text of any of my comments and/or letters to ***Tanqueray's American AIDS Rides***.

I am over 21 years of age*

Dated: 4/29/98 Signature: Sandra L Thurman

Name: Sandra L Thurman
Address: 236 Jackson Place
Washington DC 20003

Ride: Circle one: CAR5 (DC2) TCC3 BNY4 TX
Rider #: 1659

ATTN: Gary Sathuson

Kansas City AIDS Research Consortium
DISCLOSURE FORM

Having an interest or affiliation with a corporate organization does not prevent a speaker from making a presentation, but the relationship must be made known in advance to the audience in accordance with Standards for Commercial Support and our Disclosure Policy.

Program Title: 5th Update Conference
Date/Location: Friday, May 1, 1998 - Kansas City, MO
Speaker's Name: Sandy Thurman

Company (s) Contributing Support: Abbott Laboratories, Agouron Pharmaceutical, Bristol-Myers Squibb Immunology, BTG Pharmaceutical, Chiron Therapeutics, DuPont Merck, Gilead Sciences, GlaxoWellcome, Hoffmann-LaRoche, Immunex, Janssen Pharmaceutica, Liposome Co., Merck & Co., Ortho Biotech, Roerig Division, Pfizer Pharmaceutical, Pharmacia & Upjohn, Principal Health Care, Roxane Laboratories, Sequus Pharmaceutical, StatScript Pharmacy, VNA-Health Midwest

Speaker: Please complete and sign either Section I or Section II

Section I

I *do not* have any financial interest, arrangements or affiliation with one or more of the corporate organizations who 1) have contributed financial support or 2) are giving educational grants, or 3) are associated with products which will be mentioned in this program.

Signature _____ Date 4/9/98

Section II

I *do* have any financial interest, arrangements or affiliation with one or more of the corporate organizations who 1) have contributed financial support or 2) are giving educational grants, or 3) are associated with products which will be mentioned in this program. My association is (check all that apply):

Affiliation/Interest		Name of Company
Grant/Research Support	_____	_____
Consultant	_____	_____
Speaker's Bureau	_____	_____
Major Stockholder	_____	_____
Other Financial Interest (please Specify)	_____	_____

_____ _____

Signature Date

Fax-Back Form

To: Andy Carroll, Council on Foundations, 202/467-0415; fax 202/785-3926

Council on Foundations 1998 Annual Conference
April 27-29, 1998

Audiotape Recording Waiver & Consent Form

due 4/17/98

Please complete and return by 4/17/98 to Andy Carroll, Council on Foundations, 1828 L Street, NW, Suite 300, Washington, DC 20036; Fax 202/785-3926. For your convenience, this is formatted to be used as a fax-back form.

I give my consent to have the session in which I am participating recorded for the purpose of providing an oral record of my presentation at the Council on Foundations 1998 Annual Conference. I understand that the tapes of this session are available for sale to conference attendees and later to others through a contract between the Council on Foundations and a designated audio recording firm. I hereby waive any claim for loss or damages that I may have against the Council on Foundations and its designated audio recording firm, and I agree that no compensation in connection with these recordings is due, now or in the future.

Signature Sandra L. Thurman

Name *(please print)* SANDRA L. THURMAN

Date 4/13/98

ONAP Letter Tracking

Letter ID	Writer First Name	Writer Last Name	Received Date
10066	Virginia	Canter	9/3/97

Addressed To

Summers, Todd

Sender's Organization

Associate Counsel to the President

Sender's Street1

Sender's Street2

Sender's City	Sender's State	Sender's Zip
Washington, DC		

Subject

ADA Agreement/Contract

☐ Response Needed?

Response Type	Response Date	Responder ID

Responder Name	Action Promised	Action Complet	Action Date
Holewinski, Sarah			

Notes

Form to be used in lieu of ADA's Speaker Agreement -
Pass on to Sarah for contact with ADA??

JFR
1 pm
4 pm AIDS w/ staff
5 pm Dinner ADA w/ [illegible]
Speech Academy 9 pm
greetings
board @ 10:30

THE WHITE HOUSE

WASHINGTON

September 2, 1997

MEMORANDUM FOR TODD SUMMERS
DEPUTY DIRECTOR
OFFICE OF NATIONAL AIDS POLICY

FROM: VIRGINIA R. CANTER VRC
ASSOCIATE COUNSEL TO THE PRESIDENT

SUBJECT: Proposed Agreement for ADA Conference

Enclosed please find a sample letter which would be appropriate to use in order to grant permission for the American Dental Association and InfoMedix to audiotape Ms. Thurman's presentation at the 1997 ADA Annual Session. This letter is intended to be used in lieu of the form provided by InfoMedix to more clearly state the conditions under which Ms. Thurman's remarks may be recorded.

If you have any further questions, please feel free to contact me at 456-6229.

THE WHITE HOUSE

WASHINGTON

MEMORANDUM FOR VIRGINA CANTER

From: Todd Summers
Deputy Director
Office of National AIDS Policy
(202) 632-1090

Date: August 21, 1997

Re: Proposed agreement for ADA conference

Here are copies of the agreement and related cover letter relating to the American Dental Association conference, as we discussed this afternoon.

Please let me know what you think about her signing the agreement.

Thanks!

Todd

Suite 200

Office of
National AIDS Policy

Correspondence Routing Slip

Tracking Number: G 3862

Date Rcvd: 6-23-97

From: Patricia A. Johnson

American Dental Association

Staff Action:

Reviewed By Sandy:_____ **Reviewed By:** _____

Assigned To:_____

RCVD:_____ **DONE:**_____

Recommendations/Instructions:

To Support Staff:_____

Date of Response:_____

n:\corresli

American
Dental
Association

211 East Chicago Avenue
Chicago, Illinois 60611-2678
(312) 440-2500
Fax (312) 440-2707

Date: June 4,1997

To: Speakers for the 1997 ADA Annual Session

From: Ms. Patricia A. Johnson, manager of program development, Council on ADA Sessions and International Programs

Subject: Participation in the Audiotape Recording Program

The American Dental Association has arranged to audiotape the scientific program at the 1997 ADA Annual Session in Washington, D.C. Accordingly, we would like to tape record your presentation for sale to attendees during the meeting and on request after the meeting. Please sign the enclosed audiotape authorization form and return it by July 1, 1997, so your presentation can be audiotaped.

The audiotaping company, InfoMedix, has in past years produced quality verbatim audiotapes that are increasingly popular due to the excellent presentations by the participating speakers. As several speakers are presented simultaneously, we can maximize the benefits of the programs. The tapes will be marketed exclusively through the ADA with InfoMedix. Proceeds help offset the cost of staging the program.

We encourage you to sign the enclosed authorization form and return it by July 1. We appreciate your support of the program and thank you for your ongoing commitment to the dental profession. We look forward to seeing you in Washington, D.C.

Please contact me at (312) 440-2663 if you have any questions.

Thank you.

PAJ

Enclosures

cc: Dr. Terry Dickinson, chairman, Council on ADA Sessions, and International Programs
Dr. Ann Kirk, program director, Council on ADA Sessions, and International Programs

InfoMedix
AUDIO & VIDEO RECORDING SERVICES
12800 Garden Grove Boulevard • Suite F • Garden Grove, California 92843
(800) 367 - 9286 • (714) 530 - 3454 • FAX: (714) 537 - 3244

Dear Speaker,

InfoMedix will be providing a professional recording service for the American Dental Association Meeting, October 17 - 21, 1997 at which you will be speaking. In order to provide this service, we need to obtain your permission to record and make available copies of your presentation(s). This is a service to those attending and greatly adds to the educational value of the meeting. We kindly ask that you please sign, mail or FAX your permission below to (714) 537 - 3244. Thank You!

PERMISSION TO RECORD

I hereby give my permission for INFOMEDIX to record my remarks at
AMERICAN DENTAL ASSOCIATION
ANNUAL MEETING
OCTOBER 17 - 21, 1997

I understand that tape copies of my presentation will be made available for sale. Audio recordings of my remarks in no way infringes on my rights for the material to be reproduced in either printed, audio or video format. As a speaker, I am entitled to a complimentary copy of my talk, to be picked up at the meeting.

Signed:_____

Date: _____

Name (Print) :_____

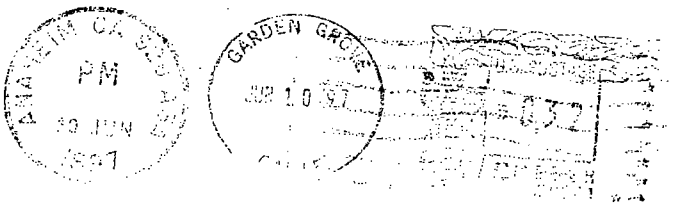
Title of presentation:_____

Day and Time: _____

Please sign and return this form by **JULY 1, 1997** to the address above or **FAX to (714) 537 - 3244.**

Thank you

INFOMEDIX
12800 Garden Grove Bl. Ste. F
Garden Grove, CA 92843



Ms. Sandra Thurman
Office of National AIDS Policy
Washington, D.C. 20503

THE WHITE HOUSE

WASHINGTON

September 8, 1997

Keith Cherry
100 W. 10th St. Suite 415
Wilmington, DE 19801

Dear Mr. Cherry:

As per your discussion with Sarah Holewinski of my office, I am writing to confirm my participation as Keynote Speaker on November 5, 1997 at the Delaware HIV/STD Conference: "Creating Our Common Vision: Future Challenges, Shared Responsibility."

As part of my agreement to present, I authorize the Delaware HIV Consortium, its successors and assign, and anyone acting in its authority to record my entire presentation, including my likeness, voice, and statements, on film, videotape, audiotape, or any similar medium; to edit such recording, so long as such editing does not in any manner alter or distort the meaning of my statements; to incorporate the same into one or more educational programs and materials (including brochures, study guides and curriculum materials). This authorization is given provided that the inclusion of my official title and position be given no more prominence than other biographical details.

I authorize the Delaware HIV Consortium to reproduce, distribute, exhibit and otherwise use or authorize the use of such programs or any portion thereof, prepared in accordance with the limits detailed above, for educational purposes at any time or place or in any manner. My presentation, as the work of a federal government employee as part of my official duties, is in the public domain under 17 U.S.C. 101, 105. Therefore, my authorization is given with the understanding that the Delaware HIV Consortium will make copies of publications or recording of my remarks available free or at cost to anyone who requests them. To the extent my remarks are subject to copyright, I grant the Delaware HIV Consortium such rights, if any, as I may have in such copyright and release the Delaware and others authorized by the Delaware HIV Consortium from such claims, liabilities, and expenses that I now have or may hereafter have by reason of such us.

The Office of National AIDS Policy and I reserve the right to utilize my statements and biographical information in any manner, including in connection with other conferences and educational programs, to reproduce, prepare derivative works, distribute copies to the public, and perform and display the same publicly by or on behalf of the Federal Government or the Office of National AIDS Policy, as the case may be.

If any additional information is required, please contact Sarah Holewinski in my office at (202) 632-1090. I look forward to participating in this very important Conference and commend you for your influential work in the fight against HIV/AIDS.

Sincerely,

Sandra L. Thurman
Director
Office of National AIDS Policy