BEFORE THE

INDEPENDENT CITIZENS' OVERSIGHT COMMITTEE TO THE CALIFORNIA INSTITUTE FOR REGENERATIVE MEDICINE ORGANIZED PURSUANT TO THE CALIFORNIA STEM CELL RESEARCH AND CURES ACT

REGULAR MEETING

LOCATION: WESTIN SAN FRANCISCO AIRPORT

1 OLD BAYSHORE HIGHWAY MILLBRAE, CALIFORNIA

DATE: JULY 24, 2014

9 A.M.

REPORTER: BETH C. DRAIN, CSR

CSR. NO. 7152

BRS FILE NO.: 95377

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1	SAN FRANCISCO, CALIFORNIA; THURSDAY, JULY 24, 2014
2	9 A.M.
3	
4	CHAIRMAN THOMAS: GOOD MORNING, EVERYBODY.
5	CAN FOLKS ON THE PHONE HEAR ME?
6	MS. LANSING: YES. I CAN HEAR YOU. THIS
7	IS SHERRY.
8	DR. MELMED: YES.
9	CHAIRMAN THOMAS: HELLO, EVERYBODY. AND
10	GOOD MORNING TO EVERYONE AND WELCOME TO SAN
11	FRANCISCO FOR THE JULY ICOC MEETING. MARIA, WILL
12	YOU PLEASE CALL THE ROLL?
13	MS. BONNEVILLE: ACTUALLY I'M GOING TO
14	START WITH THE PLEDGE OF ALLEGIANCE.
15	(THE PLEDGE OF ALLEGIANCE.)
16	CHAIRMAN THOMAS: NOW PLEASE CALL THE
17	ROLL.
18	MS. BONNEVILLE: DAVID BRENNER. SUE
19	BRYANT.
20	DR. BRYANT: HERE.
21	MS. BONNEVILLE: KEN BURTIS.
22	DR. BURTIS: PRESENT.
23	MS. BONNEVILLE: ANNE-MARIE DULIEGE.
24	ELIZABETH FINI.
25	DR. FINI: HERE.
	4

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1	
1	MS. BONNEVILLE: MICHAEL FRIEDMAN.
2	DR. FRIEDMAN: HERE.
3	MS. BONNEVILLE: JUDY GASSON.
4	DR. GASSON: HERE.
5	MS. BONNEVILLE: SAM HAWGOOD. STEVE
6	JUELSGAARD. SHERRY LANSING.
7	MS. LANSING: HERE.
8	MS. BONNEVILLE: BURT LUBIN. SHLOMO
9	MELMED.
10	DR. MELMED: HERE.
11	MS. BONNEVILLE: LAUREN MILLER.
12	MS. MILLER: HERE.
13	MS. BONNEVILLE: LLOYD MINOR.
14	DR. MINOR: HERE.
15	MS. BONNEVILLE: JOE PANETTA. FRANCISCO
16	PRIETO. ROBERT QUINT. AL ROWLETT. JEFF SHEEHY.
17	OS STEWARD. JONATHAN THOMAS.
18	CHAIRMAN THOMAS: HERE.
19	MS. BONNEVILLE: ART TORRES.
20	MR. TORRES: HERE.
21	MS. BONNEVILLE: CARL WARE.
22	DR. WARE: HERE.
23	MS. BONNEVILLE: DONNA WESTON. DIANE
24	WINOKUR.
25	MS. WINOKUR: HERE.
	5
)

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1	CHAIRMAN THOMAS: OKAY. THANK YOU, MARIA.
2	WE'RE GOING TO GO NOW TO THE CHAIR'S
3	REPORT.
4	SO THERE'S BEEN A LOT OF DISCUSSION
5	PARTICULARLY THE LAST COUPLE OF WEEKS ON THE ISSUE
6	OF CONFLICT OF INTEREST. I WANT TO ADDRESS THAT
7	HEAD-ON AS WILL RANDY IN THE PRESIDENT'S REPORT.
8	AS YOU KNOW, WE AT CIRM TAKE EVEN THE
9	PERCEPTION OF CONFLICT OF INTEREST VERY SERIOUSLY.
10	YOU WILL RECALL THAT IT WAS A CENTRAL FEATURE OF THE
11	RECOMMENDATIONS OF THE IOM THAT WE VISITED EARLY
12	LAST YEAR. WE WENT TO GREAT LENGTHS TAKING THOSE
13	RECOMMENDATIONS VERY SERIOUSLY TO PUT IN PLACE A
14	SLATE OF THE CHANGES THAT WOULD REMOVE NOT ONLY THE
15	POSSIBILITY OF A REAL CONFLICT OF INTEREST, BUT EVEN
16	THE PERCEPTION. AND YOU SHOULD KNOW THAT OVER THE
17	YEARS SINCE INCEPTION CIRM HAD IN PLACE, EVEN PRIOR
18	TO THOSE CHANGES RESPONDING TO THE IOM, A VERY
19	STRINGENT SET OF CONFLICT OF INTEREST REGULATIONS
20	THAT CIRM HAD IMPOSED ON ITSELF THAT WENT BEYOND
21	STATE LAW. AND FROM THE DATE WE FIRST STARTED TILL
22	TODAY, THERE'S NEVER, CAPITAL N, NEVER BEEN A GRANT
23	APPROVED THAT AROSE FROM A CONFLICT OF INTEREST.
24	NEVERTHELESS, WE NEED TO BE VERY VIGILANT
25	AND WATCH FOR ANY SORT OF THING THAT WOULD GIVE RISE
	_

1	TO EVEN A PERCEPTION OF CONFLICT OF INTEREST. AND
2	WE ARE DOING THAT RIGHT NOW.
3	THE NEWS REGARDING DR. TROUNSON'S
4	APPOINTMENT TO THE BOARD OF DIRECTORS OF STEM CELLS,
5	INC. GENERATED SIGNIFICANT CONTROVERSY IN THE PRESS
6	BECAUSE OF THE PERCEPTION OF CONFLICT OF INTEREST.
7	I WANT TO BE CLEAR THAT UNDER STATE LAW IT IS
8	PERMISSIBLE FOR DR. TROUNSON TO ACCEPT A POSITION
9	WITH A CIRM-FUNDED INSTITUTION, BUT IT IS IMPORTANT
10	TO NOTE THAT CIRM HAS TAKEN STEPS TO ENSURE THAT NO
11	CONFLICT OF INTEREST ARISES, INCLUDING REMINDING DR.
12	TROUNSON OF HIS OBLIGATIONS, ADVISING STEM CELLS,
13	INC. OF THE STATE LAW RESTRICTIONS, AND ADVISING
14	BOARD MEMBERS, CIRM TEAM MEMBERS, GWG MEMBERS, AND
15	CDAP MEMBERS THAT THEY MUST REFRAIN FROM ENGAGING IN
16	COMMUNICATIONS WITH DR. TROUNSON REGARDING STEM
17	CELLS, INC.
18	WE BELIEVE THAT THESE STEPS, PLUS THE
19	INVESTIGATION INTO THE CONFLICT OR POTENTIAL
20	CONFLICT UNDERTAKEN THAT DR. MILLS WILL REPORT ON IN
21	A MOMENT, WILL HELP US MAINTAIN THE PUBLIC'S TRUST
22	IN THE WAY WE DO BUSINESS. THAT PUBLIC TRUST
23	OBVIOUSLY IS PARAMOUNT. WITHOUT THAT, WE ARE
24	SUBJECT TO GREAT CRITICISM AND SECOND-GUESSING, AND
25	THAT PUBLIC TRUST MUST BE MAINTAINED ABOVE ALL ELSE.

1	WE FEEL THAT IN THIS INSTANCE, AS YOU
2	KNOW, WE LEARNED ABOUT THE ARRANGEMENT BETWEEN DR.
3	TROUNSON AND STEM CELLS, INC. FROM THE PRESS. WE
4	IMMEDIATELY TOOK STEPS TO APPROPRIATELY ADDRESS ALL
5	ISSUES ARISING FROM THAT. AND I LOOK FORWARD TO YOU
6	HEARING DR. MILLS' COMMENTARY ON THAT TO GIVE YOU A
7	FULL FLAVOR FOR IT. BUT PLEASE UNDERSTAND,
8	EVERYBODY HERE AND ALL MEMBERS OF THE PUBLIC, WE ARE
9	VERY ATTUNED TO CONFLICT OF INTEREST PROBLEMS. WE
10	DO NOT ABIDE BY THEM. WE MAKE SURE THAT WE DO
11	EVERYTHING WE POSSIBLY CAN TO AVOID THEM AND FEEL
12	THAT WE HAVE DONE JUST THAT.
13	SO IF ANYBODY HAS COMMENTS ON THAT,
14	THEY'RE WELCOME TO STEP IN AND SAY, BUT THAT IS OUR
15	POSITION. YOU HAVE A COMMENT, MR. SENATOR?
16	MR. TORRES: I HAVE MANY COMMENTS. THANK
17	YOU, MR. CHAIRMAN. I JUST WANT TO APPLAUD YOU AND
18	DR. MILLS' EFFORTS IN THIS WHOLE SITUATION.
19	I ALSO WANT TO SAY THAT WHEN I JOINED THIS
20	BOARD IN 2009 AND UP UNTIL TODAY, NOT ONE BOARD
21	MEMBER HAS EVER CROSSED THE LINE ON THE CONFLICT OF
22	INTEREST ISSUE. WHETHER IT'S A BOARD MEMBER AS A
23	PATIENT ADVOCATE, WHETHER IT'S A BOARD MEMBER FROM
24	AN INSTITUTION, WHETHER IT'S A BOARD MEMBER FROM
25	INDUSTRY, NEVER HAS ANY BOARD MEMBER COME TO ME AND

1	ASKED TO INFLUENCE A DECISION ONE WAY OR ANOTHER ON
2	ANY GRANT OR ANY ISSUE BEFORE THIS BOARD. AND I
3	RESENT THE IMPLICATION THAT THERE'S CONFLICTS OF
4	INTEREST JUST BECAUSE WE'RE SITTING ON THIS BOARD.
5	I JUST WANT THE PUBLIC TO KNOW THAT EVERY
6	MEMBER OF THIS BOARD TAKES THEIR RESPONSIBILITIES,
7	BOTH FIDUCIARY AND STATUTORILY, VERY SERIOUSLY IN
8	OUR RESPONSE TO THE TAXPAYERS OF THIS STATE. AND I
9	APPLAUD EACH AND EVERY BOARD MEMBER AND PAST BOARD
10	MEMBERS BECAUSE THEY HAVE ALL HELD THAT LINE AND
11	THAT INTEGRITY, WHICH I VERY MUCH RESPECT AND
12	ADMIRE.
13	CHAIRMAN THOMAS: THANK YOU, MR. SENATOR.
14	ANY OTHER COMMENTS BY MEMBERS OF THE
15	BOARD? OKAY. MORE TO COME ON THIS WITH DR. MILLS.
16	COUPLE OTHER POINTS I'D LIKE TO MAKE. DR.
17	MILLS NOW IS A COUPLE MONTHS INTO HIS TENURE. WE
18	HAVE HAD A NUMBER OF MEETINGS THROUGHOUT THE STATE
19	SINCE OUR LAST BOARD MEETING TO INTRODUCE DR. MILLS
20	TO ALL THE RELEVANT STAKEHOLDERS IN DIFFERENT PARTS
21	OF THE STATE. THOSE MEETINGS HAVE BEEN ATTENDED
22	VERY HEAVILY BY PATIENT ADVOCATE GROUPS, BY MEMBERS
23	OF INDUSTRY, BY MEMBERS OF ACADEMIA, AND I'M VERY
24	HAPPY TO REPORT THAT THEY'VE ALL GONE VERY WELL.
25	HE'S BEEN VERY WELL RECEIVED, AND THEY HAVE ALL
	ο

GOTTEN A CHANCE TO GET TO KNOW HIM AND WILL, OF
COURSE, AS THINGS PLAY OUT OVER THE YEARS, CONTINUE
TO DO SO. BUT AS A FIRST EFFORT TO GET EVERYBODY
ACQUAINTED WITH HIM, THINGS HAVE GONE VERY WELL. SO
WANTED THE BOARD TO BE AWARE OF THAT.
SINCE THE LAST BOARD MEETING, WE'VE HAD A
COUPLE OF MAJOR INTERNATIONAL MEETINGS, ISSCR AND
BIO. WE HAVE PLAYED, CIRM HAS PLAYED PROMINENT
ROLES IN BOTH AS IS TYPICALLY THE CASE, PARTICULARLY
SO IN BIO WHEN WE HAD A FULL DAY DEVOTED TO
REGENERATIVE MEDICINE TOPICS AND A SLATE OF PANELS.
I'D LIKE TO SHOUT OUT HERE TO DON GIBBONS AND KEVIN
MCCORMACK FOR PUTTING TOGETHER THOSE PANELS. I
THINK THEY WENT VERY WELL AND GENERATED A LOT OF
INTEREST IN THE AREA OF REGENERATIVE MEDICINE,
WHICH, OF COURSE, IF YOU SAT THROUGH ISSCR AND BIO,
YOU WOULD READILY SEE THE MOMENTUM IN THE FIELD IS
INCREASING AS IT DOES EVERY YEAR. THERE'S ALWAYS A
PALPABLE SENSE THAT THE FIELD IS PROGRESSING, THAT
THINGS WILL BE DEVELOPING THAT WILL HAVE TRUE IMPACT
ON PATIENTS MORE AND MORE WITH EACH SUCCEEDING YEAR.
I THINK THAT SENTIMENT AND REALITY IS
REFLECTED BY WHAT CIRM IS DOING IN ITS PORTFOLIO.
AS YOU MAY RECALL, WE HAD 14 PROJECTS IN DISEASE
TEAM I. AND OF THOSE 14 PROJECTS RIGHT NOW, VERY
10

1	PROUD TO REPORT THAT SEVEN HAVE FILED FOR IND'S,
2	FIVE HAVE BEEN APPROVED, AND THREE ARE ACTIVELY NOW
3	ENGAGED IN ENROLLING PATIENTS AND CONDUCTING
4	FIRST-IN-HUMAN CLINICAL TRIALS, THE LATTER THREE
5	BEING CAPRICOR, CAL-IMMUNE, AND THE SLAMON TEAM FROM
6	UCLA.
7	THIS IS A VERY EXCITING TIME. WE ARE WELL
8	ON OUR WAY TO MEETING THE GOAL THAT WE HAD OF TEN OF
9	OUR PROJECTS BEING IN ACTUALLY HAVING APPROVED
10	IND'S BY THE END OF THIS CALENDAR YEAR. AND I THINK
11	BY ANY ACCOUNT THAT IS A GREAT SIGN OF PROGRESS.
12	OBVIOUSLY WE'RE VERY HOPEFUL WITH RESPECT TO NOT
13	JUST THESE PROJECTS, BUT THE MANY THAT WILL FOLLOW
14	SUIT IN COMING YEARS, BUT IT IS A CLEAR INDICATION
15	THAT BOTH THE FIELD AND WHAT CIRM IS FUNDING, THAT
16	THE PROJECTS WE'RE FUNDING ARE MATURING, AND SCIENCE
17	MARCHES INEXORABLY ON TOWARDS WHAT WE HOPE TO BE A
18	VERY TRANSFORMATIVE RESULT.
19	SO WITH THAT, I'D NOW LIKE TO TURN IT OVER
20	TO DR. MILLS FOR THE PRESIDENT'S REPORT.
21	DR. MILLS: GOOD MORNING, MR. CHAIRMAN,
22	MEMBERS OF THE BOARD OF DIRECTORS. THANK YOU VERY
23	MUCH FOR THE OPPORTUNITY TO SPEAK ON BEHALF OF CIRM
24	TO YOU TODAY.
25	I'M GOING TO COVER A NUMBER OF DIFFERENT
	11

1	TOPICS. FIRST ONE IS MY VIEW OF HOW WE KEEP CIRM
2	FOCUSED ON OUR MISSION. WE'LL TALK A LITTLE BIT
3	MORE ABOUT THAT.
4	THE SECOND THING IS I'M GOING TO GO OVER
5	THE RECENT SECOND THING I'M GOING TO DO IS GO
6	OVER THE REVIEW OF CIRM-RELATED TRANSACTIONS
7	INVOLVING STEM CELLS, INC. THAT AROSE OUT OF STEM
8	CELLS, INC. APPOINTING OUR PAST PRESIDENT TO ITS
9	BOARD OF DIRECTORS AND MAKING THAT OFFER TO HIM
10	WHILE HE WAS STILL AN EMPLOYEE OF CIRM.
11	THE THIRD THING THAT I WANT TO GO OVER ARE
12	SOME VOLUNTARY CONFLICT OF INTEREST RESTRICTIONS
13	THAT I'M IMPOSING UPON MYSELF.
14	AND THEN THE FOURTH WILL BE REVIEW OF OUR
15	BUDGET AND THEN PERHAPS, MORE IMPORTANTLY,
16	COMMENTARY ABOUT WHAT THAT BUDGET WHAT THE
17	IMPLICATIONS OF THAT BUDGET ARE.
18	SO FIRST TO OUR MISSION, ACCELERATING STEM
19	CELL TREATMENTS TO PATIENTS WITH UNMET MEDICAL
20	NEEDS. I PROMISED THE BOARD THAT, IF I WERE ELECTED
21	PRESIDENT, I WOULD MAKE SURE EVERY DAY THAT WE
22	TALKED ABOUT OUR ROLE AND OUR MISSION. AND OUR ROLE
23	AND OUR MISSION IS ALWAYS ALL ABOUT THE PATIENTS.
24	IT IS YOUR JOB TO MAKE SURE THAT WHAT WE'RE DOING IS
25	BRINGING STEM CELL TREATMENTS TO THE PATIENTS IN
	12

1	NEED. THAT WAS THE PROMISE THAT WE MADE TO THE
2	PEOPLE OF CALIFORNIA. IT'S WHAT THE PEOPLE OF
3	CALIFORNIA VOTED FOR.
4	I AM NOT KIDDING. IT IS ALL ABOUT THE
5	PATIENTS, PERIOD. SO ONE OF THE CRITICAL ASPECTS IN
6	ACHIEVING THIS GOAL IS FOCUS. AND FOCUS
7	EVERYBODY TENDS TO LIKE THE WORD "FOCUS." THEY LIKE
8	TO USE IT. IT'S A BIT OF A BUZZ WORD. THE THING
9	PEOPLE TEND TO NOT LIKE IS THE RECIPROCAL OF FOCUS,
10	WHICH ARE ALL OF THE THINGS YOU DON'T DO BECAUSE
11	YOU'RE ACTUALLY FOCUSED. BUT WITHOUT FOCUS, WHAT
12	YOU DON'T HAVE TO EVER HAVE IS A DIFFICULT
13	CONVERSATION. WITHOUT FOCUS, YOU DON'T HAVE TO SAY
14	NO. BUT ALSO WITHOUT FOCUS, YOU TEND TO NOT GET
15	THINGS DONE. AND SO ONE OF THE ELEMENTS THAT YOU
16	WILL SEE THAT WILL FLOW THROUGH MY TENURE AT CIRM IS
17	MAKING SURE WE REMAIN FOCUSED ON THE MISSION AT
18	HAND.
19	SO I'VE DEVELOPED A FOUR-PART TEST TO HELP
20	US DO THAT, SORT OF ACT AS GUIDING PRINCIPLES,
21	SERIES OF GUIDING PRINCIPLES THAT WILL HELP US MAKE
22	DECISIONS AND DETERMINE WHETHER OR NOT THE ACTIONS
23	WE'RE TAKING ACTUALLY ARE IN ACCORDANCE WITH OUR
24	OVERALL MISSION. IT'S A FAIRLY SIMPLE TEST. THE
25	FIRST IS IS WHAT WE'RE DOING GOING TO ACTUALLY SPEED
	12

1	UP THE DEVELOPMENT OF STEM CELL THERAPIES TO
2	PATIENTS? IF IT'S NOT, IT'S PROBABLY NOT PART OF
3	WHAT WE WANT TO DO.
4	SECOND IS WILL IT INCREASE THE LIKELIHOOD
5	THAT A STEM CELL THERAPY ACTUALLY REACHES A PATIENT?
6	SO ONE OF THE THINGS THAT CIRM EXISTS FOR IS MAKING
7	SURE STEM CELL THERAPIES DON'T GO THROUGH THE
8	SO-CALLED VALLEY OF DEATH.
9	THE THIRD IS IS IT ACTUALLY ARE WE
10	ACTUALLY ADDRESSING AN UNMET MEDICAL NEED? NOW,
11	HERE, THIS COULD BE A DISEASE WHICH LITERALLY
12	DOESN'T HAVE A TREATMENT. IT COULD BE A DISEASE
13	THAT HAS A TREATMENT THAT IS INADEQUATE OR
14	INTOLERABLE. IT COULD ALSO, HOWEVER, BE A CONDITION
15	WHICH IS JUST SIMPLY UNDERSERVED. SO UNMET MEDICAL
16	NEED.
17	AND THEN THE FOURTH PART IS IS IT
18	EFFICIENT? THERE ARE A LOT OF WAYS IN WHICH WE
19	COULD ACCOMPLISH ONE, TWO, AND THREE. AND I WILL
20	SAY THIS FOURTH CRITERION IS SUBORDINATE TO THE
21	FIRST THREE. BUT WE ALSO HAVE A RESPONSIBILITY TO
22	THE TAXPAYERS OF THE STATE OF CALIFORNIA TO MAKE
23	SURE THAT WE USE THE MONEY THEY HAVE ENTRUSTED US
24	WITH WISELY. AND SO I'LL WHILE THERE ARE MANY
25	DIFFERENT PATHWAYS TO GET THINGS DONE, WHAT I'LL BE

1	LOOKING FOR AND WHAT THE TEAM WILL BE LOOKING FOR IS
2	IS THIS THE MOST EFFICIENT PATHWAY IN ORDER TO GET
3	SOMETHING DONE?
4	NOW, WHAT I'LL TELL YOU ABOUT THESE FOUR
5	CRITERIA ARE THEY ARE A GOOD STARTING PLACE FOR A
6	DISCUSSION. THEY IN THEMSELVES DO NOT RESOLVE OR
7	REMOVE DEBATE. WHAT THEY TEND TO DO IS ANCHOR THE
8	DEBATE AROUND WHAT I THINK ARE THE SALIENT POINTS,
9	BUT THERE IS SUFFICIENT SUBJECTIVITY IN HERE THAT WE
10	WILL, AND I THINK OFTEN, DEBATE AROUND THESE TOPICS
11	ON WHETHER ANY PARTICULAR PROGRAM IS OR IS NOT
12	ADDRESSING THESE POINTS. SO I'D JUST LIKE TO POINT
13	THAT OUT.
14	SO MOVING ON TO THE REVIEW OF STEM CELLS,
15	INC. AND THE TRANSACTION THAT OCCURRED. AS A RESULT
16	OF A PRESS RELEASE WHICH WAS ISSUED ON JULY 7TH
17	INDICATING THAT DR. TROUNSON HAD BEEN APPOINTED TO
18	THE BOARD OF DIRECTORS OF STEM CELLS, INC., IT
19	BECAME CLEAR, BASED ON CERTAIN CIRCUMSTANCES, THAT
20	THE RESPONSIBLE THING TO DO AT CIRM WAS TO CONDUCT A
21	REVIEW OF CERTAIN ACTIVITIES THAT TOOK PLACE WITHIN
22	A RELEVANT TIME FRAME. IT'S ALSO IMPORTANT TO KNOW
23	THAT WE WERE NOT WE DID NOT HAVE ADVANCE NOTICE
24	FROM STEM CELLS, INC. PRIOR TO THE APPOINTMENT. AS
25	A RESULT OF THAT, WE COULD NOT TAKE ANY PROACTIVE
	15

1	ACTION TO ENSURE THAT CONFLICTS OF INTEREST DID NOT
2	OCCUR. AND THAT IS REALLY THE PRECIPITATING EVENT
3	TO NECESSITATING THAT REVIEW.
4	SO THE REVIEW IS BASICALLY TO DETERMINE
5	WHETHER DR. TROUNSON MADE OR PARTICIPATED IN MAKING
6	OR ATTEMPTED TO INFLUENCE CIRM DECISIONS REGARDING
7	STEM CELLS, INC. AFTER DISCUSSIONS BEGAN WITH SCI
8	ABOUT HIS APPOINTMENT TO THEIR BOARD OF DIRECTORS.
9	NOW, I WANT TO LAY OUT A SEQUENCE OF
10	EVENTS HERE. AND I THINK, AS YOU WILL SEE THROUGH
11	THE SEQUENCE OF EVENTS, WHY THE ANNOUNCEMENT ON JULY
12	7TH GAVE US SUCH SIGNIFICANT CONCERN ABOUT A
13	POTENTIAL CONFLICT OF INTEREST. WE WERE NOT AWARE
14	OF THE ORDER AND THE TIME OF THESE EVENTS UNTIL WE
15	HAD CONDUCTED OUR INVESTIGATION.
16	FIRST, WE NOW KNOW THAT ON JUNE 9TH, 2014,
17	STEM CELLS, INC. PROVIDED A WRITTEN OFFER OF
18	EMPLOYMENT AS A MEMBER OF ITS BOARD OF DIRECTORS TO
19	ALAN TROUNSON. ON JUNE 23, 2014, STEM CELLS, INC.
20	CONTACTED CIRM REQUESTING CIRM SUBORDINATE A LOAN TO
21	AN IMPENDING COMMERCIAL LOAN THAT THEY WERE TRYING
22	TO CLOSE. ON JUNE 27TH STEM CELLS, INC. CONTACTED
23	CIRM REQUESTING THAT CIRM MAKE A LOAN DISBURSEMENT
24	TO THEM DESPITE STEM CELLS, INC. NOT MEETING A
25	FINANCIAL MILESTONE. ON JUNE 30TH WAS ACTUALLY ALAN
	16

TROUNSON'S LAST OFFICIAL DAY OF EMPLOYMENT WITH
CIRM. ON JULY 3D CIRM NOTIFIED STEM CELLS, INC.
THAT WE HAD AGREED TO GRANT AN EXCEPTION AND MAKE A
PARTIAL PAYMENT ON THE LOAN. AND THEN ON JULY 7TH
STEM CELLS, INC. ISSUED A PRESS RELEASE ANNOUNCING
THE APPOINTMENT OF DR. TROUNSON TO ITS BOARD OF
DIRECTORS.
AS A RESULT OF THIS SEQUENCE OF EVENTS, WE
IMMEDIATELY BECAME AWARE THAT THERE WAS A VERY
SIGNIFICANT ASYMMETRY TO THE INFORMATION.
SPECIFICALLY MEANING STEM CELLS, INC. WAS AWARE THAT
THEY HAD MADE AN OFFER OF EMPLOYMENT TO ONE OF OUR
EMPLOYEES. THEY THEN ENTERED INTO NEGOTIATIONS WITH
US WHILE HE WAS STILL AN EMPLOYEE THAT WOULD RESULT
IN MORE FAVORABLE TERMS FOR STEM CELLS, INC. IT
WASN'T UNTIL AFTER WE HAD AGREED TO MAKE THE PARTIAL
PAYMENT ON THE LOAN THAT WE WERE FINALLY MADE AWARE,
ACTUALLY A FEW DAYS AFTER, THAT THE APPOINTMENT HAD
BEEN MADE. AND SO THAT'S WHAT CREATED SIGNIFICANT
CONCERN IN CIRM AND WHY THE VERY FIRST REACTION THAT
CAME OUT OF US WAS WE NEED TO CONDUCT A THOROUGH
REVIEW ABOUT THIS.
SO THE SCOPE OF THE REVIEW ACTUALLY
INVOLVES THREE SEPARATE TRANSACTIONS THAT OCCURRED
DURING THIS TIME PERIOD. THE FIRST WAS ACTUALLY
17

1	INITIATED BY US, AND IT HAS TO DO WITH CHANGING A
2	PROCESS IN WHICH WE MONITOR THE FINANCIAL STABILITY
3	OF NOT JUST STEM CELLS, INC., BUT ALL OF OUR LOAN
4	RECIPIENTS, SWITCHING FROM AN EXTERNAL CONTRACTOR TO
5	BRINGING THAT FUNCTION IN-HOUSE FOR THE PURPOSES OF
6	US BEING ABLE TO SAVE MONEY. IN THE SCHEME OF
7	THINGS, IT'S ACTUALLY MINOR AND PROBABLY IRRELEVANT
8	TO THIS; BUT FOR THE SAKE OF COMPLETENESS, WE WANTED
9	TO MAKE YOU AWARE OF IT.
10	THE SECOND ISSUE WAS MORE SIGNIFICANT, AND
11	THAT WAS THE REQUEST MADE BY STEM CELLS, INC. FOR
12	THE DISBURSEMENT OF THE LOAN EVEN THOUGH THE
13	FINANCIAL MILESTONE HAD NOT BEEN MET. AND THEN THE
14	THIRD WAS THE REQUEST FOR CIRM TO CONSENT TO
15	SUBORDINATING OUR LOAN TO A NEW LOAN THAT STEM
16	CELLS, INC. WAS IN THE PROCESS OF OBTAINING.
17	BECAUSE MYSELF AND BECAUSE OUR GENERAL
18	COUNSEL WERE INVOLVED IN THE DECISION-MAKING PROCESS
19	THAT WAS TAKING PLACE AT THE TIME, WE ACTUALLY WENT
20	AND USED OUR GENERAL COUNSEL'S EXTERNAL FIRM.
21	SPECIFICALLY MARGARET PRINSENG (PHONETIC) CONDUCTED
22	THE REVIEW. IT INCLUDED INTERVIEWS WITH ALL OF THE
23	RELEVANT PEOPLE AT CIRM, ANYONE INVOLVED WITH THE
24	SCI TRANSACTIONS, REVIEWS OF ALL THE DOCUMENTS WE
25	HAD, INCLUDING EMAILS, WENT BACK TO MAY 1ST TO THE
	10

1	PRESENT AND ALSO INVOLVED THE BOARD MEMBERS. AS
2	JUST A POINT OF NOTING THAT THIS REPORT WILL BE MADE
3	AVAILABLE TO THE PUBLIC IN ITS ENTIRETY.
4	I WOULD LIKE TO POINT OUT HERE, THOUGH,
5	WITH THIS PARTICULAR PART THAT THERE ARE ALSO VERY
6	SERIOUS LIMITATIONS TO WHAT AN AGENCY LIKE CIRM CAN
7	DO IN A REVIEW LIKE THIS. WE DON'T HAVE SUBPOENA
8	POWER. WE DON'T HAVE THE ABILITY TO COMPEL
9	DISCOVERY. AND SO BASICALLY WE WERE ABLE TO LOOK AT
10	ALL OF THE RECORDS AND DOCUMENTS WE CONTROL, AND WE
11	WERE ABLE TO TALK TO OUR PEOPLE AT CIRM, BUT THERE
12	ARE INHERENT LIMITATIONS TO THAT. AND I JUST WANT
13	TO MAKE EVERYBODY AWARE OF THAT.
14	SO THE FINDINGS ARE THIS: DR. TROUNSON
15	AND STEM CELLS, INC. BEGAN DISCUSSIONS ABOUT A BOARD
16	APPOINTMENT WHILE DR. TROUNSON WAS STILL AN EMPLOYEE
17	OF CIRM. CIRM TEAM MEMBERS PARTICIPATED IN
18	DISCUSSIONS REGARDING STEM CELLS, INC. OBVIOUSLY
19	DURING THIS TIME PERIOD. HOWEVER, BASED ON ALL THE
20	INFORMATION AVAILABLE, WE FOUND NO EVIDENCE THAT DR.
21	TROUNSON MADE, PARTICIPATED IN MAKING, OR ATTEMPTED
22	TO INFLUENCE ANY OF THESE DECISIONS DURING THE
22	
23	RELEVANT TIME PERIOD. AGAIN, WITH THE CAVEAT THAT
	RELEVANT TIME PERIOD. AGAIN, WITH THE CAVEAT THAT THERE ARE LIMITATIONS TO WHAT WE WERE ABLE TO LOOK
23 24 25	

DID NOT FIND ANY INFORMATION. BEFORE I MOVE ON TO THE NEXT TOPIC, ARE THERE ANY QUESTIONS? JOE. MR. PANETTA: RANDY, THANKS FOR A VERY CLEAR AND THOROUGH EXPLANATION. AND TO YOU AND THE STAFF, YOU'VE ADDRESSED THIS ISSUE BECAUSE OBVIOUSLY TI'S GOTTEN A LOT OF ATTENTION, AND IT'S IMPORTANT	
THERE ANY QUESTIONS? JOE. MR. PANETTA: RANDY, THANKS FOR A VERY CLEAR AND THOROUGH EXPLANATION. AND TO YOU AND THE STAFF, YOU'VE ADDRESSED THIS ISSUE BECAUSE OBVIOUSLY	
4 MR. PANETTA: RANDY, THANKS FOR A VERY 5 CLEAR AND THOROUGH EXPLANATION. AND TO YOU AND THE 6 STAFF, YOU'VE ADDRESSED THIS ISSUE BECAUSE OBVIOUSLY	
5 CLEAR AND THOROUGH EXPLANATION. AND TO YOU AND THE 6 STAFF, YOU'VE ADDRESSED THIS ISSUE BECAUSE OBVIOUSLY	
6 STAFF, YOU'VE ADDRESSED THIS ISSUE BECAUSE OBVIOUSLY	
7 IT'S GOTTEN A LOT OF ATTENTION, AND IT'S IMPORTANT	
8 TO ALL OF US ON THE BOARD THAT IT BE ADDRESSED	
9 APPROPRIATELY.	
10 COUPLE OF THINGS, THOUGHTS, OR FOLLOW-UP.	
11 FIRST OF ALL, IT SEEMS AS THOUGH THERE'S NOTHING	
12 REALLY ILLEGAL OR ILLICIT THAT TOOK PLACE. CORRECT?	
DR. MILLS: YES. I'M GOING TO ASK JAMES	
ON SOME OF THE LEGAL STUFF TO GIVE THE MORE DIRECT	
15 ANSWERS.	
MR. PANETTA: BUT AT THE SAME TIME, I	
WONDER IF THERE WERE ANY LESSONS LEARNED AND ANY	
18 BEHAVIOR GOING FORWARD THAT CAME OUT OF THIS THAT	
19 COULD BE DISCUSSED.	
DR. MILLS: YES. THAT WILL BE THE NEXT	
21 POINT I GET TO.	
QUESTIONS? OKAY.	
WITH THAT, I'D LIKE TO MOVE ON TO	
MS. LANSING: I HAVE A QUESTION. THIS IS	
MY IGNORANCE, AND I'M LOOKING FOR THE DOCUMENTS.	
20	

20

1	WHAT WAS THE AMOUNT OF THE LOAN THAT WE GAVE, AND IS
2	THE LOAN SUPPOSED TO BE REPAYABLE?
3	DR. MILLS: THE LOAN IS A \$19.3 MILLION
4	LOAN. IT IS REPAYABLE, BUT WITH CONDITIONS. ONE OF
5	THEM BEING THAT ESSENTIALLY THE PROJECT IS
6	SUCCESSFUL. IF THEY ABANDON THE PROJECT, THEN THE
7	LOAN WOULD BECOME REPAYABLE.
8	MS. LANSING: THANK YOU.
9	DR. MILLS: OKAY. SO THE NEXT TOPIC I
10	WOULD LIKE TO GET INTO CENTERS AROUND THIS CONCEPT
11	OF PRESIDENTIAL CONFLICTS OF INTEREST AND LESSONS
12	LEARNED OUT OF THIS. I THOUGHT I HAD A PRETTY GOOD
13	UNDERSTANDING OF THE CONFLICT OF INTEREST RULES.
14	WHEN I TOOK THE POSITION, I WAS SURPRISED, HOWEVER,
15	TO FIND THAT THERE ARE LOOPHOLES IN THOSE RULES, AND
16	I THINK THAT MIGHT PRESENT A PROBLEM. PARTICULARLY,
17	AND I WILL SAY SPECIFICALLY, IN THE OFFICE OF THE
18	PRESIDENT AND FOR THE PRESIDENT OF CIRM.
19	SO AS THE PRESIDENT OF CIRM, I'M
20	RESPONSIBLE TO THE PEOPLE OF CALIFORNIA. THAT'S THE
21	DEAL HERE. THEY ARE THE ONES WHO FUNDED US. THEY
22	ARE THE ONES THAT PUT UP THE MONEY. AND SO IT IS TO
23	THEM WE OWE OUR FULL ACCOUNTABILITY. SO CIRM
24	OBVIOUSLY HAS ESTABLISHED POLICIES THAT ARE IN FULL
25	COMPLIANCE WITH CALIFORNIA'S CONFLICT OF INTEREST
	21

1	LAWS. THEY HAVE ALWAYS BEEN AND THAT PART IS GOOD.
2	EVEN BETTER THAN THAT, LAST YEAR UNDER J.T.'S
3	LEADERSHIP, THE CIRM BOARD VOTED TO GO EVEN FURTHER
4	WITH REGARDS TO CONFLICT OF INTEREST REQUIREMENTS
5	AND IMPOSED EVEN MORE STRINGENT RULES UPON ITSELF.
6	BECAUSE PUBLIC TRUST IS ESSENTIAL, THIS
7	DOES NOT WORK. CIRM DOES NOT WORK WITHOUT THE FULL
8	TRUST OF THE PUBLIC. I HAVE DECIDED, AGAIN,
9	SPECIFICALLY FOR MYSELF, VOLUNTARILY TO IMPOSE
LO	STRICTER STANDARDS OF CONDUCT WITH RESPECT TO
L1	POTENTIAL OR EVEN THE APPEARANCE OF CONFLICTS WHILE
L2	I'M AT CIRM. AND IN THREE MAJOR AREAS THAT CAME OUT
L3	DURING THIS REVIEW. ONE, POST-CIRM EMPLOYMENT.
L4	SECOND, THE ACCEPTANCE OF GIFTS. AND THIRD,
L5	ACCEPTANCE OF TRAVEL.
L6	SO STATE LAW DOES NOT PROHIBIT AN EMPLOYEE
L7	FROM IMMEDIATELY ACCEPTING EMPLOYMENT WITH AN ENTITY
L8	WITH WHICH THEIR AGENCY HAS CONTRACTED OR FUNDED.
L9	WE ALL HAVE LEARNED THAT NOW THROUGH THIS INCIDENT.
20	WHAT I AM TELLING YOU IS I WILL NOT ACCEPT
21	EMPLOYMENT FROM ANY ENTITY THAT CIRM FUNDS OR IS
22	ATTEMPTING TO RECEIVE FUNDS FROM CIRM FOR AT LEAST
23	ONE YEAR FOLLOWING MY DEPARTURE. WE MODEL THAT
24	AFTER THE CITY OF SAN FRANCISCO, WHO HAS, AS WE
25	COULD FIND, THE TOUGHEST VERSION OF THIS LAW AROUND.

1	WITH REGARDS TO GIFTS, STATE LAW PROHIBITS
2	EMPLOYEES FROM ACCEPTING GIFTS FROM ENTITIES FOR
3	WHICH IT DOES BUSINESS OR SEEKING TO DO BUSINESS
4	ONLY WHEN IT COULD BE REASONABLY SUSTAINED THAT THE
5	GIFT WAS INTENDED TO INFLUENCE THE EMPLOYEE'S FUTURE
6	OFFICIAL ACTIVITIES OR REWARD THEM FOR PAST ONES. I
7	VIEW THIS AS, IF YOU REMEMBER BACK SEVERAL YEARS
8	WHEN YOU WOULD GO TO THE AIRPORT AND THE TSA AGENT
9	WOULD ASK YOU WHETHER OR NOT YOU WERE CARRYING A
10	BOMB, AND YOU WOULD SAY, WELL, NO, I'M NOT CARRYING
11	A BOMB AND YOU WOULD BE ALLOWED ON THE PLANE. YOU
12	ESSENTIALLY HAVE TO OPT INTO THIS. SO IT MAKES
13	LITTLE SENSE TO ME.
14	ADDITIONALLY, THERE ARE THE STATE LAW
a -	SPECIFICALLY EXCLUDES CERTAIN TYPES OF PAYMENTS AND
15	
16	GIFTS SUCH AS THOSE THAT OCCUR UNDER HOME
	GIFTS SUCH AS THOSE THAT OCCUR UNDER HOME HOSPITALITY. SO I WANT TO REMOVE THE AMBIGUITY HERE
16	
16 17	HOSPITALITY. SO I WANT TO REMOVE THE AMBIGUITY HERE
16 17 18	HOSPITALITY. SO I WANT TO REMOVE THE AMBIGUITY HERE AGAIN AND MAKE THIS CLEAR. I WILL NOT BE ACCEPTING
16 17 18 19	HOSPITALITY. SO I WANT TO REMOVE THE AMBIGUITY HERE AGAIN AND MAKE THIS CLEAR. I WILL NOT BE ACCEPTING GIFTS FROM ANYONE WHO HAS OR IS SEEKING A CONTRACT
16 17 18 19 20	HOSPITALITY. SO I WANT TO REMOVE THE AMBIGUITY HERE AGAIN AND MAKE THIS CLEAR. I WILL NOT BE ACCEPTING GIFTS FROM ANYONE WHO HAS OR IS SEEKING A CONTRACT WITH CIRM REGARDLESS OF THEIR INTENT AND REGARDLESS
16 17 18 19 20 21	HOSPITALITY. SO I WANT TO REMOVE THE AMBIGUITY HERE AGAIN AND MAKE THIS CLEAR. I WILL NOT BE ACCEPTING GIFTS FROM ANYONE WHO HAS OR IS SEEKING A CONTRACT WITH CIRM REGARDLESS OF THEIR INTENT AND REGARDLESS OF THE NATURE OF THE GIFT OR WHERE IT OCCURS. JUST
16 17 18 19 20 21	HOSPITALITY. SO I WANT TO REMOVE THE AMBIGUITY HERE AGAIN AND MAKE THIS CLEAR. I WILL NOT BE ACCEPTING GIFTS FROM ANYONE WHO HAS OR IS SEEKING A CONTRACT WITH CIRM REGARDLESS OF THEIR INTENT AND REGARDLESS OF THE NATURE OF THE GIFT OR WHERE IT OCCURS. JUST WANT TO BE CLEAR.
16 17 18 19 20 21 22	HOSPITALITY. SO I WANT TO REMOVE THE AMBIGUITY HERE AGAIN AND MAKE THIS CLEAR. I WILL NOT BE ACCEPTING GIFTS FROM ANYONE WHO HAS OR IS SEEKING A CONTRACT WITH CIRM REGARDLESS OF THEIR INTENT AND REGARDLESS OF THE NATURE OF THE GIFT OR WHERE IT OCCURS. JUST WANT TO BE CLEAR. LAST CENTERS AROUND TRAVEL. STATE LAW

1	UNIVERSITIES AND NON-PROFITS AND TRAVEL PAYMENTS
2	RECEIVED IN CONJUNCTION WITH MAKING A SPEECH. THIS
3	IS A MORE ROUNDABOUT THING, BUT IT CAN LEAD IT
4	CERTAINLY CAN LEAD TO A CONFLICT IF ONE OF OUR
5	RECIPIENTS OF A FUND IS SETTING UP CONFERENCES FOR
6	THE PURPOSE OF BEING ABLE TO PAY FOR OUR TRAVEL, MY
7	TRAVEL, TO GO SOMEWHERE. SO AS PRESIDENT OF CIRM, I
8	WILL NOT ACCEPT TRAVEL PAYMENTS FROM ANYONE WHO IS
9	SEEKING A CONTRACT WITH CIRM OR HAS A CONTRACT WITH
10	CIRM REGARDLESS OF THE REASON OR TYPE OF PAYMENT.
11	THIS IS MY COMMITMENT TO THE PEOPLE OF
12	CALIFORNIA. THIS IS MY EXECUTED CONTRACT WITH THE
13	PEOPLE OF CALIFORNIA. THIS IS ALSO AVAILABLE. AND
14	I WILL ADHERE TO IT. THAT'S WHAT I HAVE ON THAT.
15	I'D LIKE TO MOVE NOW TO THE, UNLESS THERE
16	ARE ANY OTHER QUESTIONS, I'D LIKE TO MOVE NOW TO THE
17	BUDGET REVIEW. ART.
18	MR. TORRES: NO. 1, AS A MEMBER OF THE
19	PRESIDENTIAL SEARCH COMMITTEE, WE MADE A GREAT
20	DECISION IN HIRING YOU. AND YOUR IMMEDIATE RESPONSE
21	TO THIS SCANDAL IS MORE THAN APPROPRIATE AND QUITE
22	ADMIRABLE. AS THE ONLY OTHER MEMBER OF THIS BODY
23	THAT ALSO SERVES ON SAN FRANCISCO PUBLIC UTILITIES
24	COMMISSION, I'M ACUTELY AWARE OF THE CONFLICT OF
25	INTEREST LAWS WHICH ARE PROBABLY THE STRONGEST IN
	24

1	THE COUNTRY. AND THE FACT THAT YOU HAVE ADOPTED
2	THEM AS YOUR OWN I EQUALLY APPLAUD. I'M ALSO THE
3	ONLY BOARD MEMBER THAT HAS TO FILE TWO 700S BECAUSE
4	OF THAT SERVICE, PRO BONO SERVICE, I MIGHT ADD.
5	BUT THIS HAS BEEN A DEBATE IN CALIFORNIA
6	FOR YEARS. AND WHEN JERRY BROWN WROTE THE FAIR
7	POLITICAL PRACTICES ACT AND PUT IT ON THE BALLOT AND
8	THE PEOPLE OF CALIFORNIA APPROVED IT, IT CREATED
9	JUST A QUAGMIRE OF CONFLICT OF INTEREST ISSUES. AND
10	AS THE FIRST LEGISLATOR TO BE MARRIED UNDER
11	PROPOSITION 9, FIRST LEGISLATOR TO HAVE A BABY UNDER
12	PROPOSITION 9, I WAS RETURNING GIFTS OF DIAPERS,
13	OTHER GIFTS THAT WE RECEIVED WHICH EXCEEDED THE
14	LIMIT UNDER CALIFORNIA LAW. SO THE FACT THAT YOU
15	ARE ADOPTING THIS VERY ONEROUS STANDARD FOR YOURSELF
16	I FIND ABSOLUTELY ADMIRABLE.
17	LASTLY, AS WE WORK FORWARD, THE IMMEDIATE
18	RESPONSE BY YOU, J.T., I WAS PART OF THAT TEAM AS
19	WELL, AND JAMES HARRISON, AND KEVIN MCCORMACK, IT
20	WAS A TEAM, AND MARIA, AND IT WAS A TEAM THAT REALLY
21	CAME TOGETHER IMMEDIATELY. I THINK THE BOARD NEEDS
22	TO RECOGNIZE THAT NOT A MOMENT WAS SPARED IN
23	RESPONDING QUICKLY AND SERIOUSLY TO THIS ISSUE. AND
24	I THINK THAT SAYS A LOT ABOUT OUR CHAIR, ABOUT OUR
25	LEGAL COUNSEL OBVIOUSLY, AND CERTAINLY ABOUT YOU.
	25

1	SO I APPLAUD YOU.
2	MS. LANSING: I WOULD LIKE TO SECOND THAT.
3	I WON'T REPEAT YOUR REMARKS, BUT I'D LIKE TO SECOND
4	EVERYTHING YOU SAID.
5	MR. PANETTA: THE OTHER THING THAT
6	CONCERNS ME, I GUESS, I DON'T KNOW IF THERE'S
7	ANYTHING WE CAN DO ABOUT IT, IS THERE'S REALLY
8	NOTHING FROM WHAT I'M HEARING, THERE'S NOTHING THAT
9	PREVENTED A FIRM LIKE STEM CELLS, INC. TO ENGAGE AND
10	TO HAVE ACTIVITY WITH (INAUDIBLE); IS THAT CORRECT?
11	I THINK WE NEED TO BE AWARE OF THAT. THAT'S KIND OF
12	THE OTHER SIDE OF THIS THAT MAKES IT DIFFICULT. AND
13	WHAT YOU'VE DONE TO SET UP THIS PLEDGE IS EXEMPLARY,
14	BUT I THINK WE HAVE TO UNDERSTAND THAT THERE'S
15	NOTHING THAT CAN STOP THIS FROM HAPPENING, RIGHT?
16	DR. MILLS: THERE'S NOTHING THAT CAN STOP
17	IT FROM HAPPENING, BUT NOW THERE'S ALSO NOTHING THAT
18	CAN ENABLE IT TO HAPPEN WITH RESPECT TO THE
19	PRESIDENT'S OFFICE AT CIRM.
20	MR. SHEEHY: WITH ALL DUE RESPECT TO MR.
21	PANETTA'S COMMENT, THIS IS GOVERNMENT AND IT WOULD
22	BE GREAT IF CALIFORNIA'S COMPANIES WITH WHOM WE
23	CONTRACT DID SHOW A LITTLE RESPECT FOR PERCEPTIONS
24	OF CONFLICT. I MEAN THEY GET MONEY FROM US. THIS
25	IS BOND MONEY THAT COULD BE USED TO PAY FOR SCHOOLS

1	AND HEALTHCARE, ETC. AND I THINK THIS A UNIQUE
2	EXPERIMENT. AND IF INDUSTRY DOES NOT EXHIBIT SOME
3	DISCRETION, IT MAKES IT (INAUDIBLE) FOR THIS
4	EXPERIMENT TO BEGIN WITH. AND OTHER FOLKS ARE
5	MAKING SACRIFICES BY MAKING THIS MONEY AVAILABLE.
6	AND IT BEHOOVES ANYONE WHO RECEIVES THIS MONEY, I
7	THINK IT WOULD BE WISE FOR THEM TO TREAT THE MONEY
8	WITH THE RESPECT THAT THE TAXPAYERS AND CITIZENS OF
9	CALIFORNIA DESERVE AND NOT JUST SAY, WELL, IT'S
10	LEGAL SO IT'S OKAY, BUT TO REMEMBER WHOSE MONEY IT
11	IS.
12	SECOND, I JUST WANT TO ECHO THE COMMENTS
13	THAT EVERYBODY HAS MADE. I'M VERY GRATEFUL FOR THE
14	STRONG RESPONSE.
15	MR. PANETTA: LET ME RESPOND TO THAT
16	BECAUSE I THINK MAYBE JEFF MISINTERPRETED WHAT I WAS
17	SAYING. I DID ASK IF THEY DID ANYTHING ILLEGAL OR
18	ILLICIT, AND I EXPLAINED VERY CLEARLY THAT THE FUNDS
19	THEY RECEIVED, THE (INAUDIBLE), THAT THEY DID
20	NOTHING ILLEGAL OR ILLICIT. SO WHAT I WAS ASKING
21	ABOUT WAS CAN THEY COME IN AND DO THIS KIND OF
22	RECRUITMENT. AND, SURE, I THINK FROM AN ETHICAL
23	STANDPOINT, I THINK IT'S IMPROPER, AND I THINK
24	CERTAINLY THAT INDUSTRY SHOULD NOT ENGAGE IN THAT
25	KIND OF PRACTICE. BUT IF THE ISSUE IS FUNDING, I

27

1	DON'T THINK THERE WAS ANYTHING AND IT'S
2	IMPORTANT. I THINK THAT'S AN IMPORTANT POINT, THAT
3	THERE WAS NOTHING ILLEGAL ABOUT IT.
4	DR. MILLS: THAT'S ACTUALLY HOW I TOOK
5	YOUR COMMENTS, BUT I DID LIKE JEFF'S COMMENTS AS
6	WELL.
7	DR. FRIEDMAN: A MOMENT AGO WE HEARD
8	SOMEONE SUGGEST THAT THIS MIGHT BE A TEACHABLE
9	MOMENT FOR US ALL, AND I AGREE WITH THAT. AND MY
10	QUESTION I DON'T FIND IT INAPPROPRIATE BECAUSE OF
11	THE QUALITY OF OUR PRESIDENT OR OUR SCIENTIFIC STAFF
12	OR EVEN OUR ADMINISTRATIVE STAFF THAT AT SOME POINT
13	AN INDUSTRY, A COMPANY MIGHT WISH TO APPROACH THEM
14	WITH AN OFFER OF EMPLOYMENT. I THINK PEOPLE WHO ARE
15	THAT SKILLED AND THAT KNOWLEDGEABLE ARE OBVIOUSLY
16	ATTRACTIVE. WHAT I DO THINK, THOUGH, IS THAT FULL
17	DISCLOSURE AT THE EARLIEST MOMENT IS SOMETHING THAT
18	I THINK WE CAN ALL LEARN FROM THIS. HAD THAT BEEN
19	DONE WHEN THE OFFER WAS EVEN FIRST NOT WHEN IT
20	WAS GIVEN, BUT WHEN IT WAS FIRST DISCUSSED, I THINK
21	IT'S IMPORTANT. AND I DON'T KNOW WHAT OUR STAFF
22	POLICIES ARE, AND WE DON'T NEED TO GET INTO THAT
23	TODAY, BUT I ASK YOU PLEASE TO LOOK AT IT SO THAT
24	PEOPLE CAN ENTERTAIN THESE IDEAS. BUT WHEN THEY DO
25	SO, PEOPLE ARE PROPERLY INFORMED, THERE ARE CUTOUTS
	28

1	TO REMOVE THEIR OVERSIGHT OR ACTIVITIES ON CERTAIN
2	KINDS OF GRANTS OR PROPOSALS, AND THEN THIS CAN BE
3	HANDLED IN A VERY PROPER WAY.
4	THE GOVERNMENT DOES THIS ALL THE TIME, AT
5	NIH, AT FDA. THERE ARE WAYS IN WHICH THIS CAN BE
6	DONE AND CONTROLLED, AND THAT, I THINK, IS THE THING
7	WE CAN ALL LEARN FROM THIS. HAD THIS BEEN DONE
8	DIFFERENTLY, IT COULD HAVE BEEN DONE PROPERLY, BUT
9	IT WASN'T DONE PROPERLY.
10	DR. MILLS: SO I AGREE. I ALSO WANT TO
11	TAKE THIS OPPORTUNITY TO ACTUALLY TO SORT OF TAKE
12	THAT POINT FURTHER WHEN I EMPHASIZE THIS IS WHAT I
13	THINK THE PRESIDENT OF CIRM SHOULD DO. THIS IS NOT
14	WHAT I THINK THE OUTSTANDING TEAM THAT WORKS AT CIRM
15	SHOULD DO, BUT I WANT TO BE EXPLICIT ABOUT WHY. WE
16	HAVE SOME OF THE WORLD'S BEST SCIENTISTS INSIDE
17	CIRM, CALIFORNIA AGENCY, MANY OF WHICH WE RECRUITED
18	FROM CALIFORNIA AGENCIES, MANY OF WHICH, AFTER CIRM
19	IS NO LONGER AROUND OR AFTER THEY'VE JUST SPENT A
20	GOOD CAREER AT CIRM, MAY WANT TO GO BACK TO THOSE
21	UNIVERSITIES. I WOULD WANT TO DO NOTHING THAT WOULD
22	PUT A CHILLING EFFECT ON THEIR ABILITY TO SEEK
23	EMPLOYMENT APPROPRIATELY AT UNIVERSITIES, ALMOST ALL
24	OF WHICH IN THE STATE OF CALIFORNIA WE FUND BECAUSE
25	I ALSO WOULDN'T WANT TO DAMPEN OUR ABILITY TO GO AND

1	RECRUIT SOME OF THOSE SAME PEOPLE OUT OF THOSE
2	UNIVERSITIES.
3	SO I WANT TO JUST TAKE AN OPPORTUNITY TO
4	MAKE THIS THIS IS A RANDY MILLS AS THE PRESIDENT
5	OF CIRM INITIATIVE.
6	DR. FRIEDMAN: AND I AGREE WITH THAT. I'M
7	SIMPLY SAYING DISCLOSURE IS THE VERY BEST WAY TO
8	DEAL WITH IT.
9	DR. MILLS: IT WOULD HAVE MADE I DON'T
10	KNOW IF IT WOULD HAVE MADE EVERYTHING GO AWAY HERE.
11	IT WOULD HAVE BEEN MASSIVELY HELPFUL.
12	ANY OTHER COMMENTS? OKAY.
13	CHILA IS GOING TO DO THE FIRST PART OF THE
14	BUDGET REVIEW, AND THEN I'M GOING TO DO SOME COLOR
15	COMMENTARY AFTER THAT.
16	MS. SILVA-MARTIN: THANK YOU, DR. MILLS.
17	GOOD MORNING. SO FIRST, I'M JUST GOING TO PROVIDE
18	YOU WITH A VERY BRIEF FINANCIAL REPORT. I'M GOING
19	TO GO PROVIDE YOU FIRST WITH AN OVERALL OF OUR
20	FINANCIAL POSITION. SO AS YOU CAN SEE FROM THIS
21	POWERPOINT PRESENTATION, WE RECEIVED \$235 MILLION IN
22	FUNDING FOR THE '13-'14 FISCAL YEAR, WHICH IS
23	BASICALLY ABOUT THE SAME LEVEL THAT WE RECEIVED
24	DURING THE SAME PERIOD IN '12-'13, JUST ABOUT A \$6
25	MILLION DIFFERENCE. I WANT TO REMIND YOU THAT OUR

1	FUNDING BASICALLY COMES FROM TWO DIFFERENT SOURCES,
2	BOND PROCEEDS, BUT IT CAN ALSO COME FROM INTERIM
3	FUNDING SUCH AS COMMERCIAL PAPER.
4	SO FOR THE MAJORITY OF CIRM'S EXISTENCE,
5	WE HAVE RECEIVED BOND PROCEEDS AS OUR MAIN SOURCE OF
6	FUNDING. BUT AS YOU MAY RECALL, IN JULY OF 2012, WE
7	WERE PLACED ON COMMERCIAL PAPER, AND WE CONTINUE TO
8	RECEIVE COMMERCIAL PAPER UNTIL MARCH OF 2014. AND
9	THEN IN APRIL THERE WAS A BOND SALE, AND WE WERE
10	PART OF THAT BOND SALE WHEN WE RECEIVED \$80 MILLION.
11	NOW, THE DECISION AS TO THE TYPE OF
12	FUNDING THAT WE RECEIVE IS REALLY LEFT TO THE
13	STATE'S CONTROL AGENCIES, THE DEPARTMENT OF FINANCE
14	AND THE STATE TREASURER'S OFFICE. AND THEY MAKE THE
15	DECISION AS TO WHAT TYPE OF FUNDING WE'RE GOING TO
16	RECEIVE BASED ON THE OUTSTANDING OBLIGATIONS AT THE
17	TIME THAT THEY'RE ATTEMPTING TO PROVIDE FUNDING. SO
18	BECAUSE WE DID RECEIVE BOND PROCEEDS IN MARCH, AS
19	YOU CAN SEE, OUR CASH BALANCE HAS ACTUALLY
20	INCREASED. SO AT THE END OF THIS FISCAL YEAR, WE
21	HAD 93.4, WHICH IS ABOUT \$25 MILLION MORE THAN WE
22	HAD LAST YEAR IN JUNE.
23	SO NOW LOOKING AT OUR '13-'14 OPERATIONAL
24	EXPENDITURES, AGAIN, I WANT TO REMIND YOU THAT OUR
25	FISCAL YEAR IS FROM JULY 1 THROUGH JUNE 30. SO WE

1	ARE RIGHT IN THE MIDDLE OF YEAR-END. SO OUR
2	FINANCIAL STATEMENTS ARE DUE TO THE STATE
3	CONTROLLER'S OFFICE ON AUGUST 20TH. WE ARE ON
4	SCHEDULE TO MEET THAT TIMELINE. I DON'T ANTICIPATE
5	ANY PROBLEMS WITH MEETING THAT TIMELINE. WE DID RUN
6	OUR FIRST SET OF FINANCIAL STATEMENTS AS OF JUNE
7	30TH, AND WE HAVE POSTED \$14.6 MILLION OF
8	EXPENDITURES; BUT, AGAIN, THAT DOESN'T INCLUDE
9	ACCRUALS AND IT DOESN'T INCLUDE ANY OF THE INVOICES
10	THAT WE RECEIVE AT THE END OF THE MONTH. SO WHEN WE
11	COMPLETE THAT PROCESS, I'M ANTICIPATING THAT OUR
12	YEAR-END FINANCIAL EXPENDITURES ARE GOING TO BE AT
13	ABOUT \$15.5 MILLION OR ABOUT 90 PERCENT OF THE 17.4
14	BUDGET THAT WAS ALLOCATED FOR THIS FISCAL YEAR.
15	SO BECAUSE WE ARE IN THE MIDDLE OF THE
16	YEAR-END FINANCIAL STATEMENT PROCESS, THE YEAR-END
17	CLOSE PROCESS, WE INTEND TO PROVIDE YOU WITH A FULL
18	REPORT ON OUR '13-'14 FISCAL YEAR EXPENDITURES AT
19	THE NEXT BOARD MEETING. SO AT THIS MEETING I'LL BE
20	ABLE TO PROVIDE YOU WITH DEPARTMENTWIDE EXPENDITURES
21	AS WELL AS COST CENTER-SPECIFIC DETAILS. AT THAT
22	TIME I SHOULD ALSO BE ABLE TO PROVIDE YOU WITH AN
23	UPDATE ON OUR 6-PERCENT CAP.
24	AND AS YOU MAY BE AWARE, WHENEVER WE
25	FINALIZE AND CLOSE OUR YEAR-END STATEMENTS, WE DO

32

1	UNDERGO A FINANCIAL AUDIT. SO WE HAVE A CONTRACT IN
2	PLACE. I HAVE BEEN IN CONTACT WITH THOSE AUDITORS.
3	THEY ARE SCHEDULED TO BEGIN THE FINANCIAL AUDIT ON
4	SEPTEMBER 2D. SO AT THE NEXT BOARD MEETING, I WILL
5	BE ABLE TO PROVIDE YOU WITH AN UPDATE AS TO THE
6	STATUS OF THAT AUDIT.
7	AND THAT REALLY CONCLUDES THIS PART OF THE
8	FINANCIAL REPORT. ARE THERE ANY QUESTIONS? THANK
9	YOU.
10	DR. MILLS: THANK YOU, CHILA. OKAY. SO
11	NOW FOR THE COLOR COMMENTARY ON OUR FINANCIAL
12	STATUS. THE FIRST THING I'D LIKE TO START WITH IS
13	THE RECENT MEDIA ATTENTION HAS HAD THIS OR A SIMILAR
14	STATEMENT TO THIS SHOW UP IN ALMOST EVERY ARTICLE
15	I'VE READ: THE AGENCY IS ON TRACK TO RUN OUT OF
16	MONEY AS SOON AS 2017. WHILE THIS IS OFTEN WRITTEN,
17	AND I GUESS WHY IT'S PROPAGATED, IT JUST ISN'T TRUE.
18	AND SO WHAT I'D LIKE TO DO IS DO A HIGH LEVEL
19	OVERVIEW OF ACTUALLY WHERE WE ARE FINANCIALLY AND
20	WHY THIS STATEMENT IS NOT TRUE.
21	THE FIRST THING THAT'S IMPORTANT TO KNOW,
22	THERE IS NO TEN-YEAR TIME FRAME ON CIRM. SO WE WERE
23	GIVEN AN AMOUNT OF MONEY, BUT WE WERE NOT GIVEN A
24	TIME LIMIT. SO THAT'S THE FIRST REASON WHY THE 2017
25	ISN'T TRUE.

1	BUT IF YOU LOOK, ACTUALLY THERE'S REALLY
2	AT CIRM TWO SEPARATE FUNDS, EITHER OF WHICH GOING TO
3	ZERO WOULD BE A PROBLEM FOR US. THE FIRST AND
4	SMALLER FUND IS \$180 MILLION ALLOCATED FOR
5	ADMINISTRATIVE PURPOSES. SO THIS IS THE MONEY THAT
6	WE USE TO RUN THE CIRM OPERATIONS FOR THE SCIENTISTS
7	THAT WORK AT CIRM, FOR THE ADMINISTRATORS THAT WORK
8	AT CIRM TO CONDUCT THE GRANT REVIEWS. THE MUCH,
9	MUCH LARGER POOL OF MONEY, THE 2.75 BILLION, IS THE
10	MONEY THAT WE GIVE OUT TO OUR AWARD RECIPIENTS. AND
11	THOSE TWO BUCKETS OF MONEY ARE SEPARATE. THERE'S NO
12	COMMINGLING OF THOSE MONIES.
13	SO LET'S JUST LOOK AT THE FIRST ONE, THE
14	GRANTS ADMINISTRATION BUDGET. \$180 MILLION WAS PUT
15	INTO THAT INITIALLY. WE HAVE CURRENTLY SPENT \$89
16	MILLION OF THAT. WE HAVE 91 MILLION REMAINING. OUR
17	CURRENT SPEND RATE OUT OF THIS BUCKET IS ACTUALLY
18	ABOUT \$14 MILLION A YEAR, AND THAT'S WITHOUT ANY
19	EXTRAORDINARY EFFORTS TO OR, FRANKLY, NOT EVEN MINOR
20	EFFORTS TO TRY TO PULL IN THAT SPENDING. SO WITH
21	THAT SAID, THIS WOULD BE FUNDED UNTIL 2021 IF WE
22	KEPT IT AT FULL SPEED.
23	THE SECOND BUCKET IS THE GRANT AWARD
24	BUCKET, THE THINGS THAT WE SIT AROUND AND DECIDE
25	THIS IS A GOOD PROJECT AND PUT OUT VERY LARGE CHUNKS

1	OF MONEY IN HOPES OF SEEING RETURNS OF STEM CELL
2	THERAPIES TO OUR PATIENTS. SO WE HAVE AWARDED \$1.87
3	BILLION TO DATE. WE HAVE NOT SPENT ALL OF THAT. WE
4	HAVE JUST AWARDED THAT. WE ESTIMATE SOMEWHERE
5	BETWEEN 50 TO A HUNDRED MILLION OF THAT IS ACTUALLY
6	GOING TO BE RECOVERED BECAUSE MANY OF OUR NOT
7	MANY, ACTUALLY MOST OF OUR AWARDS ARE MILESTONE
8	BASED, AND IT'S UNREALISTIC, IF YOU'RE FAIRLY
9	ADJUDICATING A MILESTONE-BASED SYSTEM, THAT 100
10	PERCENT OF YOUR AWARDED FUNDS WOULD ULTIMATELY GET
11	PAID OUT. ON TOP OF THAT, WE HAVE ALMOST 900
12	MILLION THAT HAS NOT BEEN AWARDED, WHICH LEAVES US
13	APPROXIMATELY A BILLION DOLLARS LEFT TO AWARD.
14	THAT BILLION DOLLARS WOULD BE SUFFICIENT
15	FOR US TO FUND AT \$190 MILLION PER YEAR OF NEW
16	GRANTS ON TOP OF ALL THE OTHER ONES WE'RE PAYING OUT
17	UNTIL 2020. SO WE COULD CONTINUE MAKING NEW GRANTS
18	UNTIL 2020 AT \$190 MILLION RATE. WHY IS THE \$190
19	MILLION RATE SIGNIFICANT? IT'S ACTUALLY THE RATE WE
20	DO IT AT NOW. SO WE ARE IN A VERY SOLID FINANCIAL
21	POSITION BOTH FROM THE ADMINISTRATIVE SIDE AS WELL
22	AS THE AWARD SIDE TO BE ABLE TO CARRY CIRM FORWARD
23	WELL, WELL BEYOND 2017 AND ACTUALLY WOULD BE ALMOST
24	IMPOSSIBLE TO FIND A WAY TO HAVE US RUN OUT OF MONEY
25	IN 2017.

1	SO KEY POINTS I WANT TO MAKE HERE. THE
2	FIRST THING IS SO I DON'T KNOW HOW MANY PEOPLE HAVE
3	TRIED IT. BUT IF YOU'RE TO SUPPOSED TO BAKE A CAKE
4	AT 400 DEGREES, TURNING THE OVEN UP TO 800 DEGREES
5	DOESN'T GET IT DONE IN HALF THE TIME. AND IT
6	DOESN'T. I TRIED. IT REALLY DOESN'T. AND THE SAME
7	THING GOES FOR SPENDING MONEY IN CERTAIN ASPECTS OF
8	R&D AND DEVELOPMENT. YOU CAN'T PRY OPEN A ROSE.
9	SOME STUFF JUST ISN'T READY YET. AND, THEREFORE,
10	SPENDING MONEY FASTER WON'T NECESSARILY SPEED UP OUR
11	PROCESS. THERE ARE LOTS OF THINGS WE CAN DO TO
12	SPEED UP THE PROCESS, BUT JUST SAYING WE'RE GOING TO
13	GIVE TWICE AS MUCH MONEY TO THIS PROJECT WON'T
14	NECESSARILY SPEED IT UP.
15	THE SECOND THING THAT'S IMPORTANT IS THAT
16	WE HAVE SUCH A STRONG FINANCIAL POSITION THAT WE'D
17	BE ABLE TO FUND ALMOST ANYTHING THAT MEETS OUR
18	CRITERIA OVER THE NEXT FIVE YEARS. JUST FOR SORT OF
19	BALLPARK PURPOSES, WE COULD FUND 60 PHASE I AND
20	PHASE II CLINICAL TRIALS, NEW CLINICAL TRIALS.
21	THE THIRD THING I THINK IT'S IMPORTANT TO
22	POINT OUT IS IF YOU LOOK UP AT OUR DEVELOPMENT
23	PIPELINE ABOVE, THAT'S KIND OF HOW THINGS WORK AT
24	CIRM, ALL THE WAY FROM BASIC RESEARCH TO GETTING
25	PATIENTS TREATED IN CLINICAL TRIALS. WE ARE IN A
	26

1	REALLY FORTUNATE POSITION. WE HAVE SOME TRIALS IN
2	OR ENTERING PHASE I CLINICAL TRIALS, SOMETHING LIKE
3	16 RIGHT NOW, BUT WE HAVE A REAL BULGE BEHIND THAT
4	THAT ARE IN THE PRECLINICAL R&D PHASE THAT ARE ABOUT
5	TO ENTER CLINICAL TESTING. THIS LOOKS SO MUCH
6	DIFFERENT SIX YEARS FROM NOW, AND THAT'S VERY
7	DIFFERENT THAN IF IT WAS GOING TO END AT 2017. SIX
8	YEARS FROM NOW ALL OF THE THINGS THAT ARE IN PHASE I
9	CLINICAL TESTING ARE DONE AND ARE IN EITHER PHASE II
10	OR PHASE III OR DIDN'T WORK, AND MOST OF THE THINGS
11	THAT ARE IN PRECLINICAL ARE IN CLINICAL TRIALS. AND
12	SO ONE OF THE REASONS IT'S SO IMPORTANT TO
13	UNDERSTAND WHY 2017 ISN'T THE REAL DATE IS BECAUSE
14	OF THE ENORMITY OF PROJECTS WE HAVE COMING DOWN THE
15	PIPE THAT ARE ENTERING THE CLINICAL TRIALS WHICH IS
16	WHERE WE'RE GOING TO BE ABLE TO DEMONSTRATE NOT ONLY
17	SAFETY OF THE TECHNOLOGY, BUT MORE IMPORTANTLY ITS
18	PROOF OF CONCEPT TO BE ABLE TO MODIFY OR CURE
19	DISEASES.
20	AND SO THAT'S WHAT I WANTED TO LEAVE YOU
21	HERE TODAY, NOT A DETAILED BUDGET, NOT REALLY
22	SOPHISTICATED THIS IS WHERE EVERY DOLLAR IS GOING TO
23	GO, BUT JUST LARGE, HIGH LEVEL BUCKETS OF THIS IS
24	WHERE OUR MONEY IS, THESE ARE THE RATES AT WHICH WE
25	SPEND IT, AND WE WILL WE HAVE PLENTY OF MONEY TO

1	BE AROUND FOR QUITE A WHILE. THANK YOU. ANY
2	QUESTIONS OR I CAN GLADLY BE DONE.
3	CHAIRMAN THOMAS: THANKS VERY MUCH, RANDY.
4	ON THAT LAST POINT, I THINK IT'S VERY IMPORTANT FOR
5	THE PUBLIC TO UNDERSTAND THAT THERE HAS BEEN THIS
6	GIVEN AMOUNT AND GIVEN DOOMSDAY LOOMING OUT THERE
7	THAT'S BEEN REPORTED ON REPEATEDLY. AND I THINK
8	THAT DR. MILLS HAS DONE A GREAT JOB OF ADDRESSING
9	THAT ISSUE AND DEMONSTRATING THAT THAT, IN FACT, IS
10	NOT THE CASE.
11	SO FOR THOSE OF OUR WONDERFULLY ESTEEMED
12	SCIENCE CORPS OUT THERE WHO'S DOING THE WORK THAT
13	WE'RE FUNDING, I WANT YOU TO HEAR THIS LOUD AND
14	CLEAR AND UNDERSTAND THAT THINGS LOOK GOOD ON THE
15	FINANCIAL FRONT FOR MANY YEARS TO COME. SO, DR.
16	MILLS, THANK YOU FOR UNDERTAKING THAT ANALYSIS.
17	THAT'S SOMETHING THAT WAS NEEDED AND MUCH
18	APPRECIATED.
19	BEFORE WE GO TO THE NEXT AGENDA ITEM, WE
20	DO HAVE ONE VERY INTERESTING ANECDOTE AND STORY I'D
21	LIKE TO CONVEY HERE, WHICH COMES COURTESY OF MR.
22	SHEEHY WHO JUST ATTENDED A CONFERENCE THAT HE WILL
23	TELL YOU ABOUT AND A STATISTIC THAT I THINK YOU WILL
24	FIND MOST INTERESTING WITH RESPECT TO THE IMPACT
25	THAT CIRM IS MAKING ON RESEARCH CERTAINLY WITH

1	RESPECT TO HIV. MR. SHEEHY. WE'LL GET BACK TO
2	MR. SHEEHY. I DIDN'T NOTICE HE WASN'T THERE. WE
3	WILL GET BACK TO HIM WHEN HE COMES. OKAY. SO STAY
4	TUNED FOR THAT ONE. IT'S REALLY QUITE SOMETHING.
5	SO LET'S GO ON TO ACTION ITEM NO. 7,
6	CONSIDERATION OF APPLICATION FOR RFA 13-03A, WHICH
7	IS THE STRATEGIC PARTNERSHIP III AWARDS APPLICATION.
8	WITH RESPECT TO AN OVERVIEW OF SP III, WE'RE GOING
9	TO GO TO DR. SAMBRANO FOLLOWED BY DR. KADYK WITH
10	RESPECT TO THE SPECIFIC APPLICATION IN QUESTION.
11	DR. SAMBRANO.
12	DR. SAMBRANO: THANK YOU VERY MUCH, MR.
13	CHAIRMAN AND MEMBERS OF THE BOARD. SO WHAT I WANT
14	TO PRESENT TO YOU IS BASICALLY A CONTINUATION OF
15	WHAT HAPPENED ON MAY 29TH. THE ICOC ON THAT DAY
16	CONSIDERED THE GRANTS WORKING GROUP RECOMMENDATIONS
17	FOR THE STRATEGIC PARTNERSHIP III AWARD
18	APPLICATIONS. YOU MAY RECALL THAT THE STRATEGIC
19	PARTNERSHIP PROGRAM OVERALL SUPPORTS THE COMPLETION
20	OF PROPOSED PHASE I OR PHASE II CLINICAL TRIALS AND
21	IS ALSO INTENDED TO ATTRACT INDUSTRY ENGAGEMENT AND
22	INVESTMENT IN CIRM-FUNDED RESEARCH.
23	SO AT THAT MAY 29TH MEETING, THE ICOC
24	APPROVED FUNDING FOR THE TWO APPLICATIONS THAT ARE
25	SHOWN I THINK YOU HAVE THIS TABLE ALSO IN YOUR

1	BOOKS THAT WERE IN TIER I FOR A TOTAL OF ABOUT
2	\$20 MILLION. THE APPLICATIONS THAT ARE SHOWN IN
3	TIERS 2 AND 3 WERE NOT APPROVED. AND THEN MORE
4	SPECIFICALLY, APPLICATION SP IIIA-07526 WAS AT THE
5	TIME DEFERRED AS THE APPLICANT HAD SUBMITTED A
6	REQUEST FOR RECONSIDERATION BASED ON MATERIAL NEW
7	INFORMATION THAT THEY PROVIDED TO US.
8	THE REQUEST FOR RECONSIDERATION WAS
9	GRANTED BY THE CIRM PRESIDENT, AND PER POLICY THE
10	NEW INFORMATION WAS ASSESSED BY A SUBCOMMITTEE OF
11	THE GRANTS WORKING GROUP THAT CONSISTED OF THREE
12	SCIENTIFIC MEMBERS AND TWO PATIENT ADVOCATE MEMBERS.
13	THE TASK OF THIS GRANTS WORKING GROUP
14	SUBCOMMITTEE WAS TO ASSESS WHETHER THE NEW
15	INFORMATION, IF IT HAD BEEN AVAILABLE DURING THE
16	ORIGINAL REVIEW, WOULD HAVE CHANGED THE GRANTS
17	WORKING GROUP'S FUNDING RECOMMENDATION. THE NEW
18	INFORMATION THAT WAS PROVIDED WAS RESPONDING TO A
19	SPECIFIC CRITICISM THAT THE COMPOUND INTENDED FOR
20	CLINICAL TRIAL SPECIFICALLY TARGETS CANCER STEM
21	CELLS.
22	THIS INFORMATION WAS REVIEWED AND THEN
23	SUBSEQUENTLY IT WAS DISCUSSED BY THE GRANTS WORKING
24	GROUP SUBCOMMITTEE ON JULY 10TH VIA TELECONFERENCE
25	MEETING.

OVERALL THE REVIEWERS FELT THAT THE NEW
INFORMATION WOULD NOT HAVE CHANGED THE
RECOMMENDATION OF THE GRANTS WORKING GROUP. OF THE
SCIENTIFIC MEMBERS, ONE FELT THAT THEIR SCORE WOULD
NOT HAVE CHANGED, ONE FELT THAT THEIR SCORE MIGHT
HAVE BEEN SLIGHTLY LOWER, AND ONE THEIR SCORE MIGHT
HAVE BEEN SLIGHTLY HIGHER.
SO, THEREFORE, WE'RE BRINGING THE
APPLICATION NOW FOR YOUR FINAL CONSIDERATION
TOGETHER WITH THE OUTCOME OF THE SUBCOMMITTEE GRANTS
WORKING GROUP INDICATING NO CHANGE IN THE WORKING
GROUP RECOMMENDATION AND ALSO WITH A CIRM
RECOMMENDATION NOT TO FUND ALSO UNCHANGED. THERE IS
A MEMO THAT'S ATTACHED, I THINK, TO THIS ITEM THAT I
THINK DETAILS THE POINTS FOR CONSIDERATION REGARDING
THE CIRM STAFF RECOMMENDATION.
AND IF YOU HAVE ANY QUESTIONS ABOUT THE
APPLICATION AND ITS REVIEW, DR. LISA KADYK IS HERE
TO ADDRESS THOSE, AND DR. INGRID CARAS CAN ALSO
ADDRESS QUESTIONS OVERALL ABOUT THE STRATEGIC
PARTNERSHIP INITIATIVE.
CHAIRMAN THOMAS: THANK YOU, DR. SAMBRANO.
COMMENTS, QUESTIONS FROM MEMBERS OF THE BOARD? DO
WE HAVE ANY ADDITIONAL COMMENTS FROM MEMBERS OF THE
TEAM? DR. MILLS, DO YOU WANT TO SAY ANYTHING?
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1	ANYBODY ELSE? WE HAVE COMMENTS FROM MEMBERS OF THE
2	PUBLIC? HEARING NONE, IT IS RECOMMENDED THAT THIS
3	ITEM NOT BE FUNDED. YES.
4	MS. BONNEVILLE: I THINK JEFF WANTED TO DO
5	PROGRAMMATIC FOR THIS, DO PROGRAMMATIC REVIEW.
6	CHAIRMAN THOMAS: OH, YES. I'M SORRY.
7	MR. SHEEHY: BUT I THINK THIS IS THE
8	SUBSET, THE APPLICATION REVIEW SUBCOMMITTEE.
9	CHAIRMAN THOMAS: YES, THAT'S CORRECT.
10	MR. SHEEHY: SO
11	CHAIRMAN THOMAS: SORRY. TURN IT OVER TO
12	MR. SHEEHY. THANK YOU.
13	MR. SHEEHY: SO ACTUALLY THE WAY WE'VE
14	TYPICALLY DONE THIS IS THE FIRST QUESTION WOULD BE
15	WHETHER ONE OF THE MEMBERS OF THE SUBCOMMITTEE WOULD
16	LIKE TO MAKE A MOTION TO EITHER ACCEPT THE
17	RECOMMENDATION AND PROCEED WITH NOT FUNDING, OR
18	MOTION TO REJECT THE RECOMMENDATION AND FUND THIS.
19	MS. WINOKUR: I SO MOVE.
20	MR. SHEEHY: SO
21	DR. PRIETO: I'LL SECOND.
22	MR. SHEEHY: AND WHAT'S THE MOTION? I WAS
23	LAYING OUT THE OPTIONS.
24	MS. WINOKUR: THE MOTION IS TO ACCEPT THE
25	ORIGINAL DECISION NOT TO FUND.
	42

1	MR. SHEEHY: OKAY. SO THE MOTION HAS BEEN
2	MADE BY MS. WINOKUR AND SECONDED BY DR. PRIETO. DO
3	WE HAVE ANY DISCUSSION? AND THEN ANY PUBLIC
4	COMMENT? I THINK
5	DR. PRIETO: BECAUSE THE PROGRAMMATIC
6	ISSUE OR ONE OF THE PROGRAMMATIC ISSUES IS JUST
7	PORTFOLIO. AND I WONDERED IF GIL COULD COMMENT ON
8	WHAT, IF ANYTHING, WE FUNDED IN THE AREA OF BREAST
9	CANCER.
10	DR. SAMBRANO: SO I THINK THE MEMO THAT WE
11	PROVIDED HAS A LISTING OF SOME OF THE OTHER GRANTS
12	THAT ARE IN THIS ARENA. SO THEY'RE LISTED THERE.
13	SO THAT LISTS THREE DISEASE TEAM III GRANTS AND
14	THREE EARLY TRANSLATIONAL GRANTS THAT ARE IN THE
15	AREA OF CANCER STEM CELLS. AND THESE ARE IN VARIOUS
16	TUMORS OR CANCERS. THEY'RE NOT SPECIFIC TO BREAST
17	CANCER AS IS THIS PARTICULAR APPLICATION.
18	MR. SHEEHY: ANY OTHER COMMENTS? SO,
19	MARIA, WILL YOU BE CALLING THE ROLL.
20	MS. BONNEVILLE: YES.
21	MR. SHEEHY: AND I THINK, JAMES, DO WE
22	HAVE CONFLICTS IN THIS? DO WE HAVE ANY INSTRUCTIONS
23	AS TO
24	MR. HARRISON: NO. WE WILL ONLY CALL THE
25	MEMBERS OF THE APPLICATION REVIEW SUBCOMMITTEE WHO
	42

1	ARE NOT IN CONFLICT.
2	MR. SHEEHY: OKAY. THANK YOU.
3	MS. BONNEVILLE: STEVE JUELSGAARD.
4	DR. JUELSGAARD: YES.
5	MR. HARRISON: LET ME JUST RESTATE THE
6	MOTION TO MAKE SURE THAT EVERYONE IS CLEAR. THE
7	MOTION IS TO ACCEPT THE RECOMMENDATION NOT TO FUND
8	STRATEGIC PARTNERSHIP III APPLICATION SP 3A-07526.
9	DR. JUELSGAARD: YES, JAMES, I WAS NOT
10	MISSPOKEN. YES.
11	MS. BONNEVILLE: LAUREN MILLER.
12	MS. MILLER: YES.
13	MS. BONNEVILLE: JOE PANETTA.
14	MR. PANETTA: YES.
15	MS. BONNEVILLE: FRANCIS PRIETO.
16	DR. PRIETO: AYE.
17	MS. BONNEVILLE: ROBERT QUINT.
18	DR. QUINT: YES.
19	MS. BONNEVILLE: AL ROWLETT.
20	MR. ROWLETT: YES.
21	MS. BONNEVILLE: JEFF SHEEHY.
22	MR. SHEEHY: YES.
23	MS. BONNEVILLE: OS STEWARD.
24	DR. STEWARD: YES.
25	MS. BONNEVILLE: JONATHAN THOMAS.
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1	CHAIRMAN THOMAS: YES.
2	MS. BONNEVILLE: ART TORRES.
3	MR. TORRES: AYE.
4	MS. BONNEVILLE: DIANE WINOKUR.
5	MS. WINOKUR: YES.
6	MR. HARRISON: THE MOTION CARRIES.
7	CHAIRMAN THOMAS: OKAY. THANK YOU, MR.
8	SHEEHY. THANK YOU, DR. SAMBRANO.
9	MR. SHEEHY, WHILE YOU STEPPED OUT, I GAVE
10	A GLOWING INTRODUCTION OF THE COMMENTS THAT YOU WERE
11	GOING TO MAKE ON THE NEWS FROM THE HIV CONFERENCE
12	AND CIRM FUNDING. AND SO DIDN'T QUITE NOTE THAT YOU
13	WERE OUT OF THE ROOM AT THE TIME, SO WITHOUT FURTHER
14	ADO, SINCE YOU HAVE THE FLOOR UNDER PROGRAMMATIC,
15	COULD YOU JUST GIVE A REPORT BECAUSE I THINK THE
16	BOARD WILL FIND IT VERY INTERESTING.
17	MR. SHEEHY: SURE. AND I APOLOGIZE. I
18	GOT A TEXT FROM HOME FROM MY HUSBAND, SO WHENEVER
19	THAT HAPPENS, THOUGH NOTHING SERIOUS.
20	SO I JUST CAME BACK FROM MELBOURNE WHERE
21	THE INTERNATIONAL AIDS CONFERENCE IS BEING HELD.
22	AND ONE THING, IT WAS A BIT OF A REMINDER OF THE
23	SACRIFICES THAT THE INCREDIBLE RESEARCH COMMUNITY
24	MAKES ESPECIALLY IN THE FIELD OF GLOBAL HEALTH. WE
25	LOST JEB LANG, WHO WAS A TRUE HERO. AND AT ALL OF
	45

1	YOUR INSTITUTIONS, YOU HAVE PEOPLE EVERY DAY WHO ARE
2	FLYING ALL OVER THE WORLD IN PLACES THAT ARE NOT
3	ALWAYS REALLY SAFE, TAKING THE GREAT SCIENCE THAT WE
4	DEVELOPED IN THIS COUNTRY TO THOSE COUNTRIES WHERE
5	IT'S DESPERATELY NEEDED. AND IT'S VERY MUCH A
6	TRAGEDY FOR US TO HAVE THIS HAPPEN, BUT IT REALLY IS
7	A REMINDER OF THE HEROIC SACRIFICES A LOT OF
8	SCIENTISTS AND RESEARCHERS AND CLINICIANS ARE MAKING
9	TO ADVANCE GLOBAL HEALTH.
10	AND, FRANKLY, THE UNIVERSITY OF CALIFORNIA
11	HAS BEEN A TREMENDOUS LEADER AND STANFORD HAS A
12	GREAT PROGRAM. I THINK ALMOST EVERY INSTITUTION
13	REPRESENTED ON THIS BOARD HAS REALLY GONE ABOVE AND
14	BEYOND TO WORK AROUND THE WORLD.
15	SO ONE OF THE REASONS I WAS ATTENDING WAS
16	TO GO TO THE INTERNATIONAL AIDS SOCIETY MEETING,
17	SYMPOSIUM, ON WORK TOWARDS A CURE FOR HIV. AND ONE
18	OF THE THINGS THAT I FOUND VERY INTERESTING IS THAT
19	WE WERE THE SECOND LARGEST FUNDER, EXCLUDING
20	INDUSTRY, BUT IN TERMS OF NONPROFITS AND AGENCIES,
21	ETC. IN THE WORLD. NIH IS FIRST AND WE ARE SECOND.
22	SO WE'RE AHEAD OF THE FRENCH, WE'RE AHEAD OF THE EC,
23	WE'RE AHEAD OF GREAT BRITAIN. SO I THINK THAT IS
24	JUST REALLY INDICATIVE OF THE LEADERSHIP CALIFORNIA
25	AND CALIFORNIA CITIZENS HAVE EXHIBITED IN FUNDING
	4.6

1	THIS AGENCY AND THE TREMENDOUS WORK THAT EVERYBODY
2	INVOLVED WITH THIS ENTERPRISE HAS BEEN DOING OVER
3	THE LAST TEN YEARS.
4	SO BUT I OPEN IT UP I HAVE ACTUALLY THE
5	THING HERE THAT THEY WERE DISTRIBUTING. AND THEY
6	PULL IT UP AND WE'RE SECOND. IT'S JUST ASTONISHING.
7	SO AMAZING WORK BEING DONE.
8	CHAIRMAN THOMAS: THANK YOU FOR THAT
9	REPORT, MR. SHEEHY.
10	NOW GO ON TO ITEM 8, CONSIDERATION OF
11	APPOINTMENT OF NEW SCIENTIFIC MEMBERS OF THE GRANTS
12	WORKING GROUP. DR. SAMBRANO.
13	DR. SAMBRANO: THANK YOU, MR. CHAIRMAN.
14	SO TODAY WE'RE BRINGING FOR YOUR CONSIDERATION ONE
15	NOMINEE FOR CANDIDACY INTO THE GRANTS WORKING GROUP.
16	THIS IS DR. ROBERT MASSON WHO IS AT THE UNIVERSITY
17	OF FLORIDA. HE'S AN INTERNATIONALLY RECOGNIZED
18	NEUROSURGEON WHO SPECIALIZES IN SPINAL CORD INJURY
19	AND SPORTS SPINE MEDICINE. HIS BIOGRAPHY IS IN YOUR
20	BOOKS. AND WE ARE SEEKING HIS APPROVAL INTO THE
21	GRANTS WORKING GROUP.
22	CHAIRMAN THOMAS: ANY QUESTIONS, COMMENTS,
23	MEMBERS OF THE BOARD? DO WE NEED TO SEEK PUBLIC
24	COMMENT ON THIS? WE DO. ANY COMMENTS FROM MEMBERS
25	OF THE PUBLIC? ANYBODY ON THE PHONE WHO WOULD LIKE

1	TO COMMENT? I THINK WE CAN DO THIS ON A VOICE VOTE.
2	SO ALL THOSE IN FAVOR PLEASE NO. WE CAN'T.
3	EXCEPT FOR THOSE ON THE PHONE? NO, NOT EVEN THAT.
4	JAMES IS WILDLY WAGGING HIS FINGER. NEVER A GOOD
5	SIGN.
6	MR. HARRISON: WE NEED A MAKER AND A
7	SECOND FOR THE MOTION, AND THEN WE DO NEED TO POLL
8	THE MEMBERS WHO ARE ON THE PHONE.
9	MR. TORRES: SO MOVED.
10	CHAIRMAN THOMAS: MOVED BY SENATOR TORRES.
11	MR. SHEEHY: SECOND.
12	CHAIRMAN THOMAS: OKAY. SO VOICE VOTE
13	PLUS POLLING. OKAY. ALL THOSE IN FAVOR IN THE ROOM
14	PLEASE SIGNIFY BY SAYING AYE. OPPOSED? OKAY.
15	MARIA, CAN YOU POLL THOSE ON THE PHONE, PLEASE?
16	MS. BONNEVILLE: LAUREN MILLER.
17	MS. MILLER: AYE.
18	MS. BONNEVILLE: SHLOMO MELMED.
19	DR. MELMED: AYE.
20	MS. BONNEVILLE: CARL WARE.
21	DR. WARE: AYE.
22	MS. BONNEVILLE: SHERRY LANSING.
23	MS. LANSING: WAIT. AYE.
24	MS. BONNEVILLE: THANK YOU.
25	MR. HARRISON: THE MOTION CARRIES.
	48
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1	CHAIRMAN THOMAS: OKAY. THANK YOU, MR.
2	HARRISON.
3	NOW, WE'RE GOING ON TO ITEMS 9 AND 10,
4	WHICH HAVE TO DO WITH THE ALPHA CLINICS,
5	SPECIFICALLY HAVING TO DO WITH A SUBSET OF THE ALPHA
6	CLINICS PROGRAM, THE SO-CALLED CIMC PORTION. WHAT
7	WILL BE DISCUSSED IN ITEMS 9 AND 10 ARE SPECIFICALLY
8	THOSE ASPECTS OF THE CIMC THAT DR. MILLS WOULD LIKE
9	TO ENTERTAIN DISCUSSION AND VOTE ON. WHAT WILL NOT
10	BE DISCUSSED IS THE ALPHA CLINIC PROGRAM ITSELF AS
11	IT IS NOT SUBJECT TO ANY MODIFICATION FURTHER TO
12	THESE TWO AGENDA ITEMS.
13	SO I JUST WANT TO POINT THAT OUT TO
14	MEMBERS OF THE BOARD. THERE NEED NOT BE ANY
15	DISCUSSION ON THE CLINICS THEMSELVES. IN FACT, THE
16	SEQUENCE IS GOING TO BE THE PROPOSALS ARE IN.
17	THEY'RE GOING TO GO TO THE GRANTS WORKING GROUP IN
18	SEPTEMBER. WE WILL HAVE THEM THE RESULTS AND
19	RECOMMENDATIONS OF THE GRANTS WORKING GROUP BROUGHT
20	BACK TO THE BOARD POTENTIALLY IN THE OCTOBER TIME
21	FRAME. AND AT THAT POINT THERE WILL BE DISCUSSION
22	ON THE ALPHA CLINIC CONCEPT ITSELF. TODAY STRICTLY
23	DISCUSSION ON THE CIMC, AND I THINK WITH THAT,
24	SENATOR TORRES, DID YOU HAVE A COMMENT YOU WANTED TO
25	MAKE? NO. OKAY.
	40

1	SO I WOULD LIKE JUST TO REMIND EVERYBODY
2	HERE WHEN WE GET INTO THE DISCUSSION WITH RESPECT TO
3	THE CIMC, THAT WE ARE ALL HERE REPRESENTING THE
4	MEMBERS OF THE PUBLIC, PATIENTS EVERYWHERE AND TO
5	VIEW THIS AS SOMETHING THAT IS A UNIVERSAL CONCEPT
6	AND NOT SOMETHING THAT SPECIFICALLY APPLIES TO ANY
7	PARTICULAR INSTITUTION OR ADVOCACY GROUP. SO WITH
8	THAT, MR. HARRISON.
9	MR. HARRISON: JUST A QUICK WORD ABOUT OUR
10	CONFLICT SCREENING PROCESS. THIS IS A SOMEWHAT
11	UNUSUAL SET OF CIRCUMSTANCES BECAUSE ITEM 9 IS A
12	REQUEST FOR RECONSIDERATION OF A CONCEPT PROPOSAL
13	APPROVED BY THE BOARD WHICH RESULTED IN THE ISSUANCE
14	OF AN RFA, AND INSTITUTIONS HAVE IN RESPONSE TO THAT
15	RFA ALREADY SUBMITTED APPLICATIONS. AS A RESULT,
16	THE MEMBERS OF THE BOARD WHO ARE ASSOCIATED WITH
17	INSTITUTIONS THAT HAVE SUBMITTED APPLICATIONS ARE
18	PRECLUDED FROM PARTICIPATING BOTH IN THE DISCUSSION
19	AND THE VOTE ON THE MOTION FOR RECONSIDERATION.
20	THAT'S ITEM 9.
21	IF THE BOARD APPROVES THE MOTION FOR A
22	RECONSIDERATION AND RESCINDS ITS PRIOR APPROVAL OF
23	THE CIMC CONCEPT PROPOSAL, THAT WOULD AFFECT THAT
24	WOULD HAVE THE EFFECT OF RENDERING THE CIMC RFA AND
25	THE APPLICATIONS SUBMITTED IN RESPONSE TO IT NULL
	FO

1	AND VOID. AND AT THAT POINT IN TIME, ALL MEMBERS OF
2	THE BOARD COULD PARTICIPATE IN THE DISCUSSION OF
3	ITEM 10, WHICH IS A PROPOSAL BY DR. MILLS FOR A MORE
4	NARROWLY FOCUSED CIMC CONCEPT PLAN.
5	CHAIRMAN THOMAS: THANK YOU, MR. HARRISON.
6	DR. MILLS.
7	DR. MILLS: THANK YOU, GUYS. SO THE FIRST
8	THING I'D LIKE TO SAY BEFORE WE GET STARTED WITH
9	THIS RECONSIDERATION PROCESS CENTERS AROUND WHAT I
10	HOPE ENDS UP EMERGING OUT OF A RELATIONSHIP BETWEEN
11	CIRM, BETWEEN MYSELF, AND BETWEEN THE BOARD OF
12	DIRECTORS WHERE WE HAVE HONEST, OPEN COMMUNICATIONS
13	ABOUT THINGS. ONE OF THE THINGS I WANT TO MAKE SURE
14	THE BOARD UNDERSTANDS IS THAT I WILL BRING TO YOU MY
15	HONEST ASSESSMENT. IF I REVIEW SOMETHING AND I LOOK
16	AT IT AND IT'S NOT GOOD, I WILL TELL YOU THAT. IF I
17	LOOK AT SOMETHING AND IT'S GOOD, I WILL TELL YOU
18	THAT. THAT I PROMISE. IT WILL BE HONEST AND IT
19	WILL BE AUTHENTIC.
20	WHAT I DON'T WANT THE BOARD TO TAKE AWAY
21	WAS ACTUALLY WRITTEN AND WHY I'M BRINGING IT UP,
22	THAT IF THE BOARD DOESN'T GO ALONG WITH RANDY, RANDY
23	SHOULD RESIGN. NO. THAT'S NOT THE WAY THIS WORKS.
24	I WILL PUT FORTH MY ARGUMENTS IN THE BEST INTEREST
25	OF CIRM. YOU GUYS ARE HIGHLY ACCOMPLISHED, HIGHLY
	51

1	SKILLED, SUCCESSFUL PEOPLE AND HAVE A LOT OF TALENTS
2	AND ABILITIES AND WILL MAKE DECISIONS SOMETIMES THAT
3	WILL AGREE WITH ME, SOMETIMES THAT WILL NOT AGREE
4	WITH ME. THAT'S THE WAY IT'S SUPPOSED TO WORK. I
5	AM FINE WITH THAT. I WANT YOU TO KNOW THAT BEFORE
6	WE GET STARTED.
7	SECOND IS AROUND TIMING OF THIS. THE
8	TIMING OF THIS IS NOT OPTIMAL. I COMPLETELY
9	UNDERSTAND THAT. THIS WAS A CONCEPT PLAN THAT WAS
10	DRAWN UP. IT WAS AN RFA THAT WAS SENT OUT. THESE
11	WERE RESPONSES THAT CAME IN BEFORE I WAS APPOINTED
12	PRESIDENT OF CIRM. IT'S ALSO A TREMENDOUS AMOUNT OF
13	MONEY. IT \$70 MILLION THAT WE'RE TALKING ABOUT.
14	AND SO MY OPTIONS WERE BASICALLY TO COME IN AND SAY
15	HERE'S THIS \$70 MILLION THING. POLITICALLY THE
16	EASIEST THING TO DO WOULD BE JUST NOT SAY ANYTHING
17	AND LET THE PROGRAM ROLL THROUGH. BUT I CAN'T DO
18	THAT. THAT'S NOT WHO I AM. AND SO UNFORTUNATELY,
19	FROM A TIMING STANDPOINT, I NEED TO GIVE YOU MY
20	HONEST ASSESSMENT ABOUT THIS PROGRAM AND A CRITICAL
21	ASSESSMENT ABOUT THIS PROGRAM AND WHAT I THINK ARE A
22	FEW POINTS OF WEAKNESS WHICH JUST NOT ONLY COULD
23	LEAD TO DUPLICATION OF COST, BUT MORE SPECIFICALLY
24	FOR ME COULD ACTUALLY HURT THE SUCCESS OF THE
25	PROGRAM, WHICH IS THE MORE IMPORTANT ASPECT FROM MY
	E2

1	STANDPOINT.
2	SO WITH THAT BACKGROUND, LET'S GET INTO
3	THIS. SO THE OVERALL MISSION OF THE CURRENT
4	PROPOSAL IS TO ACCELERATE THERAPEUTIC DEVELOPMENT
5	AND DELIVERY OF STEM CELL THERAPIES. THAT'S A
6	PRETTY BROAD GOAL TO HAVE. IT'S ACTUALLY SO BROAD,
7	IT'S FAIRLY SIMILAR TO THAT OF CIRM IN ITS ENTIRETY.
8	AND THAT WAS ONE OF THE FIRST ALARM BELLS THAT WENT
9	OFF IN MY MIND ABOUT THIS.
10	THIS, HOWEVER, OR ACTUALLY THE SPECIFIC
11	STATED GOALS OF THE PROGRAM, ONLY THE FIRST OF WHICH
12	IS CLINICAL TRIALS, AND SO THE CONCEPT ABOUT THE
13	CLINICS IN MY MIND MEANT WE'RE GOING TO BE CREATING
14	A CLINICAL TRIAL INFRASTRUCTURE THAT WOULD ENABLE
15	RAPID CONDUCT OF CLINICAL TRIALS, PARTICULARLY THOSE
16	IN EARLY STAGES WHICH OTHERWISE WOULDN'T BE ABLE TO
17	GET DONE BECAUSE EARLY STAGE CLINICAL TRIALS OFTEN
18	LACK THAT KIND OF INFRASTRUCTURE. BUT BEHIND THERE
19	ARE THINGS LIKE DELIVERY OF APPROVED STEM CELL
20	THERAPEUTICS. WELL, THIS IS A FIVE-YEAR RFA. THAT
21	WOULD BE GOOD NEWS. DATA INFORMATION, PATIENT
22	EDUCATION INCLUDING TACKLING MEDICAL TOURISM,
23	HEALTHCARE ECONOMICS, DEVELOPING SUSTAINABLE
24	BUSINESS MODELS, AND WORKING ON REIMBURSEMENT. IT'S
25	NOT THAT I THINK THESE CONCEPTS IN AND OF THEMSELVES

1	ARE PARTICULARLY BAD. IT'S THAT WHEN THEY'RE
2	BUNDLED ALL INTO ONE GIANT PROPOSAL, I THINK IT
3	SIGNIFICANTLY AS A CURRENT THEME LACKS FOCUS. AND
4	WHEN SOMETHING LACKS FOCUS, THERE'S A CHANCE THAT IT
5	WON'T GET ACCOMPLISHED.
6	SO IT'S A TWO-PART CONCEPT PLAN. THE
7	FIRST ARE THE ALPHA CLINIC SITES. SO WE HAVE
8	FUNDING FOR UP TO FIVE SITES FOR FIVE YEARS. THIS
9	DOES NOT THIS IS IMPORTANT TO UNDERSTAND. THIS
10	DOES NOT BUILD ANY PHYSICAL INFRASTRUCTURE, NOR DOES
11	IT DIRECTLY FUND ANY CLINICAL TRIALS THAT ARE
12	PROPOSED IN THIS APPLICATION. MOST OF THE FUNDING
13	COVERS PERSONNEL COSTS. IT'S APPROXIMATELY \$11
14	MILLION PER AWARD FOR FIVE YEARS FOR A TOTAL OF \$55
15	MILLION.
16	THE SECOND PART OF THE CONCEPT PLAN DEALS
17	WITH THE CIMC OR THIS COORDINATING CENTER. IT'S
18	FUNDED FOR FIVE YEARS, ONE SITE FOR FIVE YEARS, AT A
19	TOTAL COST OF \$15 MILLION. THE OVERALL COST OF THE
20	PROJECT BEING \$70 MILLION.
21	SO HERE'S MY ATTEMPTING TO NOT GET INTO
22	TOO MUCH DETAIL, FRANKLY, BECAUSE I DON'T THINK MY
23	CONCERN ABOUT THIS ACTUALLY IS AT THE DETAIL LEVEL.
24	IT'S AT THE HIGH LEVEL. THE CONCEPT PLAN, AS I SAID
25	BEFORE, CONTAINS MANY LAUDABLE ACTIVITIES. IT
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1	REALLY DOES. SO AS WE TALK THROUGH THIS, DON'T TAKE
2	MY COMMENTS TO MEAN I DON'T THINK WE SHOULD BE DOING
3	PATIENT EDUCATION OR SIMILAR THINGS. I JUST DON'T
4	WANT THEM ALL BUNDLED INTO ONE GIANT CONCEPT PLAN.
5	HOWEVER, I DO BELIEVE, AS I MENTIONED, THE
6	PLAN LACKS FOCUS AND ATTEMPTS TO TACKLE TOO MANY
7	ISSUES AT THE SAME TIME. BECAUSE OF THAT, THERE IS
8	A VERY REAL, AND I MEAN A VERY REAL POSSIBILITY OF
9	DUPLICATION OF COSTS. AND THEN BECAUSE OF THAT, THE
10	\$70 MILLION PRICE TAG IS NOT CLEARLY JUSTIFIED IN
11	TERMS OF THE BENEFITS IT WILL DELIVER TO THE PEOPLE
12	OF CALIFORNIA. IT'S A LOT OF MONEY, \$70 MILLION
13	OVER FIVE YEARS, AND IT'S NOT CLEAR THAT WE'RE GOING
14	TO GET \$70 MILLION OF BENEFIT OUT OF THE PROGRAM AS
15	IT'S CURRENTLY CONSTRUCTED. AND JUST SORT OF IN A
16	NUTSHELL, PROGRAMS THAT TRY TO FIX EVERYTHING
17	USUALLY TEND TO FIX NOTHING.
18	SO MY PROPOSED APPROACH HERE, AGAIN, WHICH
19	FEEL FREE TO DISAGREE WITH, IS TO NOT THROW THE GOOD
20	OUT WITH THE BAD BECAUSE I DO THINK THERE'S MERIT TO
21	THIS CONCEPT IN GENERAL. BUT INSTEAD, FOCUS THE
22	ALPHA CLINICS DOWN TO THOSE ACTIVITIES THAT
23	SPECIFICALLY ACCELERATE PATIENT PARTICIPATION IN
24	CLINICAL TRIALS. OVER A FIVE-YEAR TIME PERIOD IS
25	WHAT THIS RFA IS FOR. SO THOSE REALLY ARE THE
	EE

1	ACTIVITIES WE SHOULD BE FOCUSING ON.
2	SO I WOULD RECOMMEND, AND THIS IS THE PART
3	THEY WERE TALKING ABOUT IN PREVIOUS THAT WE'LL TAKE
4	UP A PROGRAMMATIC REVIEW AT A LATER MEETING. BUT
5	JUST SO YOU UNDERSTAND, THE OVERALL PLAN WOULD BE
6	CONTINUE WITH THE CLINICS PORTION OF THE CONCEPT
7	PLAN. SO THIS IS THE ACTUAL ALPHA CLINIC SITES.
8	THAT REVIEW OF THE APPLICATIONS THAT ARE IN WILL
9	TAKE PLACE IN SEPTEMBER. I WILL BE RECOMMENDING A
10	LIMITED NUMBER OF CENTERS FOR INITIAL FUNDING WITH
11	THE THOUGHT OF OBJECTIVELY EVALUATING THEIR PROCESS
12	OVER SOME PILOT PERIOD OF TIME TO FIGURE OUT WHETHER
13	OR NOT THESE THINGS ARE WORKING GREAT AND WE SHOULD
14	ACCELERATE THEM FASTER THAN WE THOUGHT. THERE ARE
15	SOME ISSUES WITH THEM THAT WE NEED TO FIX BEFORE WE
16	EXPAND OR THEY'RE NOT MEETING OUR NEEDS AND WE
17	SHOULD STOP THEM. AGAIN, THAT IS A TOPIC NOT FOR
18	TODAY. THAT IS A TOPIC FOR PROGRAMMATIC WHEN IT
19	COMES BACK AT A LATER MEETING. THE TOPIC FOR THE
20	DAY, THOUGH, IS TO REVISE THE CIMC PORTION OF THE
21	CONCEPT PLAN, NARROW THE FOCUS TO CLINICAL
22	OPERATIONS. AS I SAID, THE OTHER TOPICS
23	PARTICULARLY THAT THE BOARD FINDS COMPELLING WE CAN
24	ISSUE ADDITIONAL CONCEPT PLANS AND SPECIFIC RFA'S
25	FOR, AND THEN REISSUE AN RFA FOR A FOCUSED CIMC.

1	SO THE FIRST THING WE WOULD NEED TO DO
2	TODAY WOULD BE TO DECIDE WHETHER OR NOT THAT THERE'S
3	SUFFICIENT CONVICTION AMONG THE MEMBERS OF THE BOARD
4	TO RESCIND THE CIMC PORTION OF THE CONCEPT PLAN.
5	CHAIRMAN THOMAS: OKAY. THANK YOU, DR.
6	MILLS. ARE THERE QUESTIONS ON THE PRESENTATION THUS
7	FAR WITH RESPECT TO ITEM NO. 9, WHICH IS THE
8	RESCINDING OF THE CIMC CONCEPT PLAN? QUESTIONS OR
9	COMMENTS FROM MEMBERS OF THE BOARD?
10	DR. JUELSGAARD: I MOVE THAT WE RESCIND
11	THE CIMC CONCEPT PLAN AS PREVIOUSLY APPROVED.
12	MR. ROWLETT: SECOND.
13	CHAIRMAN THOMAS: MOVED BY MR. JUELSGAARD,
14	SECONDED BY MR. ROWLETT. NO. JAMES, AGAIN, WAGGING
15	HIS FINGERS. AL IS CONFLICTED.
16	MR. TORRES: I SECOND IT. I'M NEVER IN A
17	CONFLICT.
18	CHAIRMAN THOMAS: THANK YOU, SENATOR
19	TORRES. SO FURTHER DISCUSSION? ANY COMMENTS BY
20	FOLKS ON THE PHONE? COMMENTS BY MEMBERS OF THE
21	PUBLIC? YES. WE HAVE A COMMENT. DON, PLEASE.
22	MR. REED: I AM SWAYED BY YOUR ARGUMENTS.
23	CHAIRMAN THOMAS: PLEASE, DON, JUST FOR
24	THOSE ON THE PHONE, EVEN THOUGH WE ARE WELL FAMILIAR
25	WITH YOUR VOICE AND YOUR WONDERFUL PARTICIPATION FOR

1	MANY YEARS, COULD YOU PLEASE JUST IDENTIFY YOURSELF
2	FOR THOSE ON THE PHONE.
3	MR. REED: THIS IS DON REED, A PATIENT
4	ADVOCATE. I'M SWAYED BY THE ARGUMENTS, BUT I CAN'T
5	HELP BUT REMEMBER THE REASONS FOR MAKING A COMBINED
6	SITUATION. THERE'S SO MUCH OF THE STEM CELL TOURISM
7	GOING ON, AND IT SEEMS SO LOGICAL TO ME THAT THE
8	PLACE TO COMBAT IT WOULD BE THE CENTER OF WHAT IS
9	DECENT AND HONORABLE AND RESPECTABLE SCIENCE THAT IS
10	THE ALPHA CLINICS HEADQUARTERS THEMSELVES. I ALSO
11	REALLY THINK IT'S IMPORTANT THAT WE SHARE THE
12	INFORMATION THAT IS GATHERED, PAID FOR BY CALIFORNIA
13	WITH OTHER SCIENTISTS. AND, AGAIN, I SEE NO BETTER
14	PLACE TO PUT THAT REPOSITORY OF KNOWLEDGE THAN AT
15	THE CIMC.
16	SO I THINK THAT WE NEED TO THINK CAREFULLY
17	BEFORE WE TAKE A CONCEPT THAT WAS VERY SOUND AND
18	VALID AND, TO MY MIND, WORKABLE AND TO SAY, WELL,
19	LET'S DON'T DO IT. I THINK WE SHOULD THINK
20	CAREFULLY ABOUT THIS.
21	CHAIRMAN THOMAS: THANK YOU. ADDITIONAL
22	COMMENTS FROM MEMBERS OF THE PUBLIC?
23	MS. BRAZWELL: THANK YOU VERY MUCH. MY
24	NAME IS JENNIFER BRAZWELL. I'M FROM THE UNIVERSITY
25	OF CALIFORNIA SAN DIEGO. I'M PRESENTING A LETTER

1	FROM SANDRA A BROWN, VICE CHANCELLOR FOR RESEARCH AT
2	THE UNIVERSITY OF CALIFORNIA SAN DIEGO.
3	"CHAIRMAN THOMAS AND MEMBERS OF THE CIRM
4	INDEPENDENT CITIZENS OVERSIGHT COMMITTEE, ON BEHALF
5	OF THE UNIVERSITY OF CALIFORNIA SAN DIEGO, I WOULD
6	LIKE TO EXPRESS CONCERN ABOUT THE PLAN TO RECONSIDER
7	THE RFA 13-07 AS ORIGINALLY APPROVED AND ITS
8	RESCINDING THE COORDINATING AND INFORMATION
9	MANAGEMENT CENTER.
10	"WE BELIEVE THAT THE COMPLEXITIES OF
11	ORGANIZING AND COORDINATING MULTIPLE CENTERS WITH
12	ACTIVE CLINICAL TRIALS HAVE BEEN UNDERESTIMATED.
13	THIS IS AN AREA WHERE WE HAVE CONSIDERABLE EXPERTISE
14	THROUGH THE CLINICAL AND TRANSLATIONAL SCIENCE
15	AWARDS, THE IMMUNE TOLERANCE NETWORK, COMPREHENSIVE
16	CANCER CENTERS, AND MANY OTHER COLLABORATIVE
17	NETWORKS.
18	"IF THE ALPHA CLINICS EACH HAVE FIVE TO
19	TEN TRIALS PER YEAR, THEN THE NETWORK WILL MANAGE UP
20	TO 250 CLINICAL TRIALS OVER FIVE YEARS. WITHOUT
21	CENTRAL, EXPERT, ETHICAL, AND REGULATORY SUPPORT, A
22	CONSISTENT AND INTEROPERABLE INFORMATICS PLATFORM,
23	CORES FOR BIOSTATISTICS REVIEW, AND ADEQUATE
24	OVERSIGHT OF SITE ACCRUAL AND PERFORMANCE, THE ALPHA
25	CLINICS WILL SIMPLY BE A GROUP OF INDEPENDENT SILOS

1	THAT DUPLICATE EFFORTS. MULTIPLE CENTER STUDIES
2	USING VARYING PLATFORMS WILL BE PROBLEMATIC. THE
3	PROPOSED FUNDS REQUIRED TO MANAGE THIS NETWORK ARE
4	RELATIVELY MODEST COMPARED TO OTHER SIMILAR
5	NETWORKS, ESPECIALLY IF ONE CONSIDERS EXTRAMURAL
6	FUNDS THAT WOULD SUPPORT THE INDIVIDUAL TRIALS. THE
7	ADVANTAGES OF COORDINATION ARE MANIFEST. IT IS A
8	MODEST INVESTMENT TO ASSURE THAT THE FINAL CRITICAL
9	STEP IN THE \$3 BILLION ALLOCATION TO TEST STEM CELL
10	THERAPIES IN PEOPLE MEETS STANDARDS FOR CLINICAL
11	TRIAL PERFORMANCE.
12	"THERE ARE SOME COMPONENTS OF THE RFA THAT
13	COULD POTENTIALLY BE RECONSIDERED, SUCH AS BUSINESS
14	DEVELOPMENT. RATHER THAN ELIMINATE THE ENTIRE
15	PROGRAM AND THEN UNDERRESOURCE COORDINATING CENTERS
16	IN A WAY THAT WILL PROVIDE LITTLE OR NO BENEFIT,
17	PERHAPS CIRM MIGHT CONSIDER REBUDGETING AFTER
18	REVIEWING THE PROPOSALS AND ELIMINATING SOME
19	ELEMENTS CONSIDERED LESS BENEFICIAL. THIS SORT OF
20	POSTAWARD ACTIVITY IS COMMON. EXPERIENCED MINDS IN
21	THE STATE HAVE GIVEN DETAILED AND THOUGHTFUL
22	CONSIDERATION TO THE QUESTION OF A COORDINATING
23	CENTER AND A NETWORKED APPROACH. TO RESCIND THE
24	CONCEPT PLAN AND NOT REVIEW THE PROPOSALS MEANS THAT
25	THE GRANTS WORKING GROUP, THE CALIFORNIA INSTITUTE

1	FOR REGENERATIVE MEDICINE, AND THE BOARD WILL NOT
2	RECEIVE THE BENEFIT OF THE IDEAS EXPRESSED IN THE
3	PROPOSALS.
4	"WE ARE ALSO CONCERNED THAT THE REVIEW
5	PROCESS AND THE DISCUSSION WILL NOT INCLUDE MANY
6	STAKEHOLDERS BECAUSE OF PERCEIVED CONFLICTS OF
7	INTEREST. WITHOUT A FULL AND OPEN DISCUSSION, THE
8	RAMIFICATIONS OF RESCINDING THE COORDINATING AND
9	INFORMATION MANAGEMENT CENTER MIGHT NOT BE FULLY
10	UNDERSTOOD BY INDIVIDUALS WHO ARE NOT CONTENT
11	EXPERTS.
12	"THANK YOU VERY MUCH FOR YOUR
13	CONSIDERATION." AND THIS LETTER, ALL OF THE
14	FOREGOING IS SIGNED BY SANDRA A. BROWN, PH.D., THE
15	VICE CHANCELLOR FOR RESEARCH, UNIVERSITY OF
16	CALIFORNIA SAN DIEGO. THANK YOU VERY MUCH.
17	CHAIRMAN THOMAS: THANK YOU, JENNIFER.
18	AND THANK YOU, DON. OTHER COMMENTS FROM MEMBERS OF
19	THE PUBLIC?
20	DR. NYLAND: YES. THANK YOU. I'M DR.
21	JOYCE NYLAND, CHIEF RESEARCH INFORMATION OFFICER AND
22	DEPARTMENT CHAIR OF INFORMATION SCIENCES, AND
23	PROFESSOR AT CITY OF HOPE CANCER CENTER. WE WERE
24	ONE OF THE FIVE APPLICANTS FOR THE CIMC. I JUST
25	WANT TO BE SURE I'M ALLOWED TO COMMENT ON THIS
	C1

1	MOTION. I SUBMITTED THE PROPOSAL THAT WENT IN AS
2	THE PRINCIPAL INVESTIGATOR.
3	WE REMAIN VERY EXCITED ABOUT THE ALPHA
4	CLINIC NETWORK, AND WE THINK IT WILL BRING GREAT
5	PROMISE FOR STEM CELL THERAPY TO COME TO FRUITION IN
6	THE MOST EFFICIENT, RAPID MANNER. AND I THINK IT
7	MEETS ALL FOUR OF DR. MILLS' CRITERIA FOR AN
8	EFFECTIVE PROGRAM THAT HE WENT OVER THIS MORNING.
9	I HAVE OVER 25 YEARS EXPERIENCE IN RUNNING
10	NATIONAL, INTERNATIONAL DATA COORDINATING CENTERS
11	FOR PHASE I-II TRIALS IN CANCER, FOR DIABETES, AND
12	FOR STEM CELL THERAPY. I THINK THE USE OF THE WORD
13	"RESCIND" MAY HAVE BEEN AN UNFORTUNATE CHOICE OF
14	WORDS. MY UNDERSTANDING FROM THE PROPOSAL IS THAT
15	THE CIMC WILL REMAIN A CRITICAL COMPONENT OF THE
16	ALPHA CLINICS NETWORK, BUT IT WILL BE REVISED AND
17	FOCUSED AS A MORE TRADITIONAL, ROBUST DCC. AND SO I
18	AGREE WITH A MUCH MORE FOCUSED CIMC CONCEPT PLAN
19	THAT DR. MILLS HAS PROPOSED.
20	THAT WAS ONE OF OUR CONCERNS WHEN WE
21	APPLIED FOR THIS APPLICATION WAS THAT IT WAS QUITE
22	DIFFUSE, REQUIRED EXPERTISE FROM MANY DIFFERENT
23	AREAS THAT USUALLY ARE OUTSIDE OF A DATA
24	COORDINATING CENTER. I THINK THIS FOCUSED PROPOSAL
25	WILL ALLOW THE GROUP THAT IS SELECTED TO SUCCEED AS

1	A MORE TRADITIONAL, ROBUST DATA COORDINATING CENTER
2	AND ASSIST THE ALPHA CLINICS CONDUCT SAFE,
3	SCIENTIFICALLY VALID TRIALS.
4	AND THE OTHER AIMS THAT DR. MILLS PROPOSES
5	TO ELIMINATE ARE IMPORTANT, AS MR. REED SAYS, BUT I
6	AGREE THAT IT'S CRITICAL TO NOT DIVERT THE PRIMARY
7	FUNCTION OF A DATA COORDINATING CENTER BY ALSO
8	TRYING TO BE AN INFORMATION CLEARINGHOUSE AND
9	BUSINESS MODELING FOR FUTURE SUSTAINABILITY. I
10	THINK THE ALPHA CLINICS AND THE CIMC SHOULD
11	PARTICIPATE IN THESE IMPORTANT ACTIVITIES, AND THERE
12	SHOULD PERHAPS BE OTHER GROUPS WITH THAT EFFORT, BUT
13	I AGREE WITH A MORE FOCUSED EFFORT THAT WILL HELP
14	SUCCEED AND ALLOW THE TRIALS TO SUCCEED. THANK YOU.
15	CHAIRMAN THOMAS: THANK YOU. ANY OTHER
16	COMMENTS FROM MEMBERS OF THE PUBLIC? HEARING NONE,
17	MARIA NOTHING FURTHER FROM MEMBERS OF THE BOARD?
18	HEARING NONE, MARIA, WILL YOU PLEASE CALL THE ROLL.
19	MR. HARRISON: JUST TO BRIEFLY RESTATE THE
20	MOTION, IT IS TO RESCIND THE CIMC CONCEPT PROPOSAL
21	PREVIOUSLY APPROVED BY THE BOARD.
22	MS. BONNEVILLE: STEVE JUELSGAARD.
23	DR. JUELSGAARD: YES.
24	MS. BONNEVILLE: LAUREN MILLER.
25	MS. MILLER: YES.
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1	MS. BONNEVILLE: JOE PANETTA.
2	MR. PANETTA: YES.
3	MS. BONNEVILLE: ROBERT QUINT.
4	DR. QUINT: NO.
5	MS. BONNEVILLE: JONATHAN THOMAS.
6	CHAIRMAN THOMAS: YES.
7	MS. BONNEVILLE: ART TORRES.
8	MR. TORRES: AYE.
9	MS. BONNEVILLE: CARL WARE.
10	DR. WARE: AYE.
11	MS. BONNEVILLE: DIANE WINOKUR.
12	MS. WINOKUR: ABSTAIN.
13	MR. HARRISON: THE MOTION CARRIES WITH SIX
14	YES VOTES, ONE ABSTENTION, AND ONE NO VOTE.
15	CHAIRMAN THOMAS: OKAY. LET'S MOVE ON TO
16	ITEM NO. 10, DR. MILLS.
17	DR. MILLS: OKAY. SO THE REVISED CONCEPT
18	PLAN WHICH YOU WERE PROVIDED IN DETAIL, AND I
19	ACTUALLY PROVIDED IT IN TWO FORMS, ONE IN THE CLEAN
20	FORM WHICH IS SIMPLY THE PREVIOUS CONCEPT PLAN WITH
21	ESSENTIALLY DELETIONS OF THE THINGS WHICH WERE LESS
22	FOCUSED ON THE PROGRAM CENTERED AROUND CLINICAL
23	OPERATIONS ASPECTS OF THE CIMC. SO FOR A VERY
24	DETAILED VERSION OF WHAT THE CONCEPT PLAN IS, YOU
25	CAN REFER TO THAT IN YOUR MATERIALS.
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1	SO WHAT I'M GOING TO GO OVER HERE IS
2	FAIRLY HIGH LEVEL. THE FIRST THING IS REFINING DOWN
3	THE OBJECTIVE TO THE DEVELOPMENT OF CLINICAL
4	CAPACITY AND ASSOCIATED RESOURCES DESIGNED TO
5	SUPPORT THE EFFECTIVE IMPLEMENTATION AND EXECUTION
6	OF CLINICAL TRIALS. THAT IS, I THINK, AT LEAST A
7	GOOD FIRST STEP ON SOMETHING THAT WE COULD
8	ACCOMPLISH AND ADD THE APPROPRIATE INFRASTRUCTURE
9	INTO THE STATE OF CALIFORNIA FOR CONDUCTING THESE
10	HIGHLY COMPLEX CLINICAL TRIALS AND PROVIDE THEM THE
11	CLINICAL OPERATIONS AND REGULATORY SUPPORT THAT
12	THEY'LL NEED TO GET THEM DONE IN AN EFFICIENT
13	MANNER.
14	SPECIFICALLY, WHAT I'VE ATTEMPTED TO DO
15	WITH THIS REVISION, THE SPECIFIC THINGS BEING
16	REMOVED, OUTREACH, EDUCATION AND TRAINING,
17	INFORMATION MANAGEMENT CENTER, AND BUSINESS
18	DEVELOPMENT ACTIVITIES. AGAIN, NOT THAT ANY OF
19	THESE ARE PROBLEMATIC, BUT THAT THEIR INCLUSION IN
20	HERE WOULD LEAD TO THE DILUTION OF THE OVERRIDING
21	PREMISE OF THE CIMC AND, MORE IMPORTANTLY, WHAT
22	WE'RE TRYING TO GET DONE WITH ALPHA CLINICS AND, MY
23	FEAR, COULD LEAD TO DUPLICATIVE COSTS, BUT, MORE
24	IMPORTANTLY, COULD ACTUALLY SLOW THE PROGRAM DOWN,
25	WHITCH TANKOLVES SETTING STEM SELL TREATMENTS TO
	WHICH INVOLVES GETTING STEM CELL TREATMENTS TO

1	PATIENTS. WHAT REMAINS LEFT ARE SERVICES FOR
2	CLINICAL TRIAL DESIGN AND EXECUTION, SPECIFICALLY
3	THOSE FOR EARLY STAGE CLINICAL OPERATIONS BECAUSE
4	THAT'S WHERE WE ARE IN THE FIELD OF STEM CELLS, AND
5	THOSE DIRECTLY RELATED TO HIGH QUALITY CONDUCTING
6	HIGH QUALITY STEM CELL CLINICAL TRIALS.
7	THE IMPACT OF THE BUDGET ON THE CIMC WOULD
8	BE A REDUCTION FROM \$15 MILLION PROPOSED IN THE
9	ORIGINAL TO 10 MILLION, AGAIN, OVER THE SAME
10	FIVE-YEAR PERIOD. THANK YOU.
11	CHAIRMAN THOMAS: DO I HEAR A MOTION TO
12	APPROVE THE NEW CIMC PROPOSAL AS SET FORTH?
13	MR. TORRES: SO MOVED.
14	CHAIRMAN THOMAS: MOVED BY SENATOR TORRES.
15	DR. JUELSGAARD: SECOND.
16	CHAIRMAN THOMAS: SECONDED BY MR.
17	JUELSGAARD. COMMENTS, QUESTIONS FROM MEMBERS OF THE
18	BOARD? MR. PANETTA.
19	MR. PANETTA: THANK YOU, MR. CHAIRMAN.
20	DR. MILLS, I CAN APPRECIATE WHAT WE'RE TRYING TO DO
21	HERE WITH REGARD TO FOCUS. AND I KNOW WHAT I'M
22	GOING TO ASK YOU PROBABLY APPRECIATE MORE THAN MOST.
23	BUT IN THE HISTORY OF CONDUCTING CLINICAL TRIALS IN
24	THE BIOPHARMACEUTICAL INDUSTRY, ONE OF THE GREATEST
25	CHALLENGES WE FACE IS RECRUITMENT OF PATIENTS, AS

1	YOU KNOW. AND MY QUESTION IS REALLY WITH THE
2	REMOVAL OF THESE OTHER TWO ELEMENTS, DO YOU FEEL
3	CONFIDENT THAT WE WILL BE ABLE TO RECRUIT PATIENTS
4	INTO THE TRIALS THAT ARE BEING CONDUCTED AT THESE
5	ALPHA CLINICS BECAUSE, A, OBVIOUSLY WE WANT TO GET
6	THE TREATMENTS TO THE PATIENTS, AS YOU SAID; AND, B,
7	WE WANT TO MAKE SURE THAT WE CREATE A LEVEL OF
8	VISIBILITY AND KNOWLEDGE FOR WHAT'S BEING DONE OUT
9	HERE IN THE PUBLIC, AS YOU ALSO TALKED ABOUT IN THE
10	PAST.
11	SO I JUST WOULD LIKE TO BE SATISFIED THAT
12	YOU GOING FORWARD ARE GOING TO BE ABLE TO DO THAT.
13	DR. MILLS: SO ABSOLUTELY. HAVING
14	ENROLLED MYSELF 1700 PATIENTS IN STEM CELL CLINICAL
15	TRIALS OVER THE LAST TEN YEARS, A MAJOR LIMITING
16	FACTOR IS THE RECRUITMENT OF PATIENTS INTO CLINICAL
17	TRIALS. I THINK IT'S IMPORTANT TO KNOW THAT THE
18	CLINICAL SITE ASPECT OF THE ALPHA CLINICS CONTAINS
19	FUNDING TO ENHANCE PATIENT RECRUITMENT, AND THE
20	CLINICAL OPERATIONS ACTIVITIES WHICH REMAIN IN HERE
21	ALREADY CENTER AROUND PATIENT RECRUITMENT. SO THE
22	PATIENT RECRUITMENT ASPECT OF THIS, I AGREE, IS
23	CRITICAL, AND I WOULD ALSO SAY REMAINS.
24	CHAIRMAN THOMAS: OTHER COMMENTS,
25	QUESTIONS FROM MEMBERS OF THE BOARD? ANY COMMENTS

1	FROM THOSE ON THE PHONE? COMMENTS FROM MEMBERS OF
2	THE PUBLIC?
3	MR. REED: THE INFORMATION MANAGEMENT
4	SEEMS TO ME COULD BE A SMALL BUT IMPORTANT PART THAT
5	COULD BE KEPT. THERE'S GOING TO BE A LOT OF
6	INTEREST IN WHAT GOES ON AT THESE PLACES, AND THEY
7	ARE THE CENTER. AS A PERSON WHO SUPPORTS SPINAL
8	CORD INJURY RESEARCH VERY MUCH, I KNOW I'M GOING TO
9	BE FASCINATED WITH WHAT, IF THAT IS CHOSEN, WHAT
10	THAT AREA COMES UP WITH. I THINK IT VERY LOGICAL
11	THAT AT LEAST A SMALL EFFORT BE MADE TO MANAGE THE
12	INFORMATION WHICH IS GATHERED AND PRODUCED BY THESE
13	SITUATIONS. I DON'T THINK THEY'LL COST A GREAT DEAL
14	OF MONEY. I DON'T SEE WHAT THE OBJECTION WOULD BE.
15	DR. NYLAND: JOYCE NYLAND, CITY OF HOPE.
16	I HAVE FOUR RECOMMENDATIONS. I APPLAUD THIS NEW
17	PROPOSAL AS I SAID EARLIER.
18	ONE RELATES TO WHAT MR. REED JUST SAID. I
19	THINK THE INFORMATION MANAGEMENT CENTER AS DESCRIBED
20	IN THE ORIGINAL PROPOSAL WAS PERHAPS TOO BROAD AND
21	TOO MUCH OF AN ACTIVITY, STEM CELL TOURISM, ALL
22	RESEARCH IN STEM CELLS. I DO THINK WE SHOULD HAVE A
23	HIGHLY ROBUST INFORMATICS PLATFORM, AS OUR UCSD
24	REPRESENTATIVE SAID, AND I THINK THE CONCEPT PLAN
25	COULD BE AUGMENTED BY EMPHASIZING THE DEVELOPMENT
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1	AND DEPLOYMENT OF A ROBUST DATA MANAGEMENT
2	INFRASTRUCTURE FOR THE ALPHA CLINIC NETWORKS AS HIGH
3	QUALITY DATA ARE AT THE ESSENCE OF DETERMINING
4	EFFICACY AND EFFECTIVENESS OF CLINICAL TRIALS. AND
5	THAT COULD INCLUDE A WEB SITE THAT SUPPORTS
6	RECRUITMENT, DISSEMINATION OF INFORMATION. WE
7	FREQUENTLY DO THAT IN OUR DATA COORDINATING CENTERS,
8	BUT PERHAPS JUST ON A MORE LIMITED SCALE.
9	ANOTHER RECOMMENDATION IS SEMANTIC. I
10	WOULD RECOMMEND CHANGING WHEREVER IT SAYS CLINICAL
11	OPERATIONS OR CLINICAL CAPACITIES TO CLINICAL
12	RESEARCH OPERATIONS JUST FOR CLARITY. I THINK THE
13	DATA COORDINATING CENTER WILL BE SUPPORTING THE
14	CLINICAL RESEARCH OPERATIONS. IT'S JUST A LITTLE
15	BIT MORE SPECIFIC AND I THINK ACCURATE AND FOCUSED
16	AS WE'RE TRYING TO BE.
17	ONE OTHER RECOMMENDATION WOULD BE TO
18	MODIFY THE CONCEPT PLAN AS THE ORIGINAL RFA WAS
19	STRUCTURED WITH REGARD TO THE PERCENT EFFORT OF THE
20	PI. THIS CONCEPT PLAN RETURNS TO THE IDEA THAT HAD
21	BEEN CHANGED, THAT THE PI MUST HAVE A HUNDRED
22	PERCENT EFFORT IN THIS PROJECT. THE REASON I SAY
23	THIS IS THIS COULD POSSIBLY ELIMINATE EXPERIENCED
24	ACADEMIC CENTERS FROM APPLYING WHERE THE PI IS
25	LIKELY TO HOLD AN ACADEMIC POST AND HAVE MULTIPLE

1	RELATED ACTIVITIES AND RESPONSIBILITIES THAT WOULD
2	ACTUALLY BENEFIT THE ALPHA CLINIC NETWORKS. SO
3	MAKING IT LESS THAN A HUNDRED PERCENT, ALTHOUGH
4	STILL A VERY STRONG COMMITMENT AND SCALING OVER TIME
5	PERHAPS AS IT WAS BEFORE AS THE ALPHA CLINICS SCALE.
6	AND THEN LET'S SEE. THE LAST THING WOULD
7	BE I FOUND IT VERY CONFUSING IN THE TWO RFA'S FOR
8	THE ALPHA CLINICS VERSUS THE CIMC WITH REGARD TO THE
9	FUNDING STRUCTURE. IN THE CIMC RFA IT DESCRIBED THE
10	SLATE OF NONFEE-BASED AND FEE-BASED ACTIVITIES AND
11	WHICH TRIALS WERE GOING TO BE SUPPORTED IN THE ALPHA
12	CLINICS, BUT THAT LANGUAGE WAS NOT REFLECTED OR
13	SYNCHRONIZED WITH THE ALPHA CLINICS. SO I'M
14	CONCERNED THERE MAY BE CONFUSION ABOUT HOW THE
15	BUDGETS ARE GOING TO FLOW AND HOW THE ACTIVITIES ARE
16	GOING TO BE FUNDED.
17	LASTLY, A QUESTION. I ASSUME THAT THIS IS
18	GOING TO REQUIRE, I DO UNDERSTAND NOW, A NEW
19	APPLICATION FROM CIC GROUPS THAT WOULD LIKE TO
20	APPLY. BUT THEN THE TIMING IS REALLY IMPORTANT. I
21	KNOW DR. MILLS MENTIONED THE TIMING IS UNFORTUNATE,
22	BUT I THINK IT'S CRITICAL THAT THE CIMC BE IN PLACE
23	FROM THE INCEPTION OF THE ALPHA CLINICS IF AT ALL
24	POSSIBLE. SO TO GET THIS MOVING AS QUICKLY AS
25	POSSIBLE SO THAT THERE IS THAT SUPPORT,
	70

1	INFRASTRUCTURE, AND TEAMWORK RIGHT FROM THE
2	BEGINNING OF BUILDING THIS NETWORK. THANK YOU.
3	CHAIRMAN THOMAS: WE HAVE AN ADDITIONAL
4	COMMENT HERE FROM A MEMBER OF THE PUBLIC.
5	DR. CREASEY: MY NAME IS GRAHAM CREASEY.
6	I'M A PROFESSOR OF SPINAL CORD INJURY MEDICINE AT
7	STANFORD. AND IN WORKING WITH PATIENTS SUCH AS
8	PEOPLE WITH WHEELCHAIRS WHO ARE VERY CONCERNED ABOUT
9	THE POTENTIAL FOR STEM CELLS FOR PARALYSIS, I THINK
10	IT'S VERY EVIDENT HOW MUCH MISINFORMATION CAN GET
11	AROUND AND HOW CRUCIAL IT IS THAT WE SHOULD HAVE A
12	STRONG EDUCATION OUTREACH COMPONENT DEALING WITH NOT
13	ONLY STEM CELL TOURISM, BUT STEERING A REALISTIC
14	COURSE BETWEEN THE HYPE THAT IS SOMETIMES THERE AND
15	THE PESSIMISM THAT IS ALSO THERE.
16	SO I'M A VERY FIRM BELIEVER IN THE
17	IMPORTANCE OF THIS OUTREACH AND EDUCATION, NOT ONLY
18	FOR INDIVIDUAL PATIENTS, BUT ALSO FOR THE ACCURATE
19	INFORMATION ABOUT CIRM AND ABOUT CALIFORNIA THAT'S
20	PRESENTED TO THE WORLD.
21	SECONDLY, ON THE HEALTH AND ECONOMICS
22	ISSUE, I THINK WE'RE AWARE THAT THE NUMBER OF
23	SIGNIFICANT TRIALS, AND I KNOW OF SOME IN MY OWN
24	AREA, THAT HAVE FOUNDERED NOT FOR LACK OF SCIENCE,
25	BUT FOR LACK OF WELL-THOUGHT THROUGH ECONOMICS. AND
	71

1	THE ISSUES WE'RE DEALING WITH ARE HIGH RISK, HIGH
2	RETURN WHERE THE WORK IS EXPENSIVE, BUT THE
3	POTENTIAL FOR COST SAVINGS ARE ALSO SUBSTANTIAL.
4	AND I THINK THAT SOMETIMES WE MAY BE IN DANGER OF
5	THIS WORK FOUNDERING FOR LACK OF COORDINATED AND
6	INTEGRATED APPROACH TO THE ECONOMIC SUPPORT OF
7	CLINICAL TRIALS. AND THAT LOOKING AT THIS FROM THE
8	GET-GO AND TYING THIS INTO THE CLINICAL TRIAL
9	MANAGEMENT AND THE OTHER ASPECTS WOULD BE VERY
10	CRUCIAL IF WE AREN'T TO SEE SOME OF THE FAILURES
11	THAT WE'VE SEEN IN THE PAST.
12	CHAIRMAN THOMAS: THANK YOU. OTHER
13	COMMENTS FROM MEMBERS OF THE PUBLIC? DR. MILLS,
14	WOULD YOU LIKE TO ADDRESS ANY OF THOSE TOPICS JUST
15	BROUGHT UP THERE?
16	DR. MILLS: IT JUST GOES BACK TO SORT OF
17	AN OVERRIDING POINT I HAD, WHICH IS I'M NOT
18	SUGGESTING ANY OF THOSE TOPICS ARE NOT WORTHY. I'M
19	JUST SUGGESTING THAT THOSE ARE THINGS THAT COULD AND
20	SHOULD BE HANDLED UNDER DIFFERENT CONCEPT PLANS AND
21	DIFFERENT RFA'S.
22	CHAIRMAN THOMAS: THANK YOU. AND COULD
23	YOU, SOMEBODY SPEAK TO THE QUESTION AS TO PROCESS ON
24	THE NEW RFA AND TIMETABLE AND ALL THAT SORT OF THE
25	THING?

1	DR. MILLS: WELL, DEPENDING ON WHAT'S
2	DECIDED HERE, IF WE HAVE A NEW CONCEPT PLAN, THEN
3	WE'LL GO BACK TO WORK ON AN RFA. I WOULD IMAGINE WE
4	WOULD BE ABLE TO DO THAT IN AN ABBREVIATED TIME
5	FRAME SINCE WE HAVE A DOCUMENT THAT WE'RE BEGINNING
6	OR STARTING WITH THAT WILL BE JUST NARROWING IN
7	FOCUS AS OPPOSED TO CREATING FROM WHOLE CLOTH.
8	SPECIFICALLY WHAT THAT TIME WOULD BE I CAN'T TELL
9	YOU EXACTLY, BUT WE WOULD DO IT AS QUICKLY AS WE
10	COULD.
11	CHAIRMAN THOMAS: THANK YOU. MS. WINOKUR.
12	MS. WINOKUR: I'M A BIT UNCOMFORTABLE WITH
13	ADDRESSING THESE TWO PARTS OF THE ALPHA CLINICS
14	SEPARATELY BECAUSE WE'RE GOING TO MAKE SOME CHANGES
15	IN THE BASIC ALPHA CLINIC PROPOSAL DESCRIPTION,
16	ANATOMY, AND THE CIMC IS REALLY A SUPPORT EFFORT IN
17	REGARD TO THE ALPHA CLINIC. SO UNTIL WE DECIDE ON
18	THE NEW PURPOSE, PROGRAMS, ETC., OF THE ALPHA
19	CLINICS, IT'S HARD FOR ME TO DESCRIBE WHAT THE CIMC
20	WOULD BE DOING.
21	CHAIRMAN THOMAS: MR. JUELSGAARD.
22	DR. JUELSGAARD: TO JUST SHIFT TOPICS JUST
23	REAL QUICKLY, ONE OF THE COMMENTS THAT WAS MADE THAT
24	I THOUGHT MIGHT BE USEFUL JUST TO GET YOUR REACTION
25	TO, DR. MILLS, IS THE IDEA THAT THE PRINCIPAL
	70

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1	INVESTIGATOR, THE PI, FOR THE CIMC SHOULD DEVOTE 100
2	PERCENT OF THEIR TIME TO THIS EFFORT. AND I DO
3	APPRECIATE THE COMMENT THAT REALLY GREAT PI'S CAN
4	HAVE OTHER ACTIVITIES GOING ON, AND I JUST WONDER
5	HOW REALISTIC IT MIGHT BE TO HAVE THAT REQUIREMENT
6	AS PART OF THIS CONCEPT.
7	DR. MILLS: I AGREE. THAT WAS A LEGACY
8	THAT JUST DIDN'T COME OUT. BUT I THINK IT'S A FAIR
9	COMMENT.
10	CHAIRMAN THOMAS: DR. MILLS, CAN YOU JUST
11	RESPOND TO MS. WINOKUR'S QUESTION?
12	DR. MILLS: RIGHT. SO I GUESS I'M A
13	LITTLE CONFUSED BY THE QUESTION. WHAT YOU'RE SAYING
14	IS YOU WANT TO SEE HOW THE ALPHA CLINIC REVIEW COMES
15	OUT TO DETERMINE WHAT THE CIMC SHOULD DO?
16	MS. WINOKUR: WELL, WE'RE GOING TO
17	ESSENTIALLY RESTRUCTURE THE ALPHA CLINICS, ELIMINATE
18	SOME ACTIVITIES, ETC., AND I THINK THE WORK OF THE
19	CIMC IS DIRECTLY RELATED TO THAT. AND SINCE WE
20	HAVEN'T FIRMED UP THAT FIRST PART, IT'S DIFFICULT
21	FOR ME TO ELIMINATE OR ADD OR CHANGE THE CIMC.
22	DR. MILLS: SO THE WAY THE PROPOSALS CAME
23	IN ARE TWO DIFFERENT RFA'S. THE ALPHA CLINICS,
24	WHICH ARE THE SITES THAT ACTUALLY ARE RUNNING THE
25	CLINICAL TRIALS, ARE SEPARATE, INDEPENDENT SITES TO
	74

1	BEGIN WITH. THEY COME IN WITH THEIR OWN CLINICAL
2	TRIALS TO START WITH. SO THE KINDS OF ACTIVITIES
3	THAT WE'RE TALKING ABOUT THE CIMC, THE COORDINATING
4	CENTER, ULTIMATELY TAKING ON AND AUGMENTING ARE
5	ALREADY IN PLACE FOR THESE INITIAL TRIALS.
6	SO THOSE ACTIVITIES ARE ALREADY IN PLACE.
7	IT'S AS THEY GET UP AND RUNNING AND HAVE ADDITIONAL
8	NEW CLINICAL TRIALS THAT THE CIMC IS ABLE TO
9	DIRECTLY AUGMENT. SO I THINK THE SECOND THING IS
10	IMPORTANT. WE'RE NOT CHANGING ANYTHING ABOUT THE
11	ALPHA CLINICS. WE'RE JUST NARROWING THE FOCUS OF
12	THE CIMC TO DIRECTLY SUPPORT THE ALPHA CLINICS AND
13	ONLY SUPPORT THE ALPHA CLINICS IN THEIR ABILITY TO
14	CONDUCT THOSE CLINICAL TRIALS. BUT THE INITIAL
15	TRIALS COMING IN HAVE MOST OF THAT WORK ALREADY
16	TAKEN CARE OF.
17	CHAIRMAN THOMAS: DR. PRIETO.
18	DR. PRIETO: I'D JUST LIKE TO SPEAK IN
19	SUPPORT OF THESE CHANGES BECAUSE I LOOK AT THE
20	ACTIVITIES THAT ARE BEING REMOVED FROM THE CIMC, AND
21	IT SEEMS TO ME THAT THESE ARE ALL CAPABILITIES THAT
22	SHOULD HAVE A GREAT DEAL OF IMPORTANCE FOR ANY
23	RESEARCH INSTITUTION FAR BEYOND THE ACTIVITIES, THE
24	STEM CELL-RELATED ACTIVITIES, THAT CIRM IS FUNDING.
25	AND THEY'RE GOING TO BE, IF THEY'RE SMART,
	75

1	DEVELOPING THESE ACTIVITIES AS RAPIDLY AND AS
2	GREATLY AS THEY CAN. THAT DOES NOT HAVE TO BE CIRM
3	FUNDED. IT'S GOING TO HAPPEN ANYWAYS.
4	CHAIRMAN THOMAS: MR. JUELSGAARD.
5	DR. JUELSGAARD: I WOULD JUST ECHO WHAT
6	FRANCISCO JUST SAID. I CONSIDER THESE ADDITIONAL
7	ACTIVITIES SORT OF BOLT-ON ACTIVITIES. THAT IS,
8	DOWN THE ROAD IF WE THINK THAT IT'S IMPORTANT THAT
9	WE DO ONE OF THE THINGS THAT WE'RE EXCLUDING RIGHT
10	NOW, WE CAN ALWAYS ADD THEM ON EITHER AS PART OF THE
11	CIMC OR AS A SEPARATE GROUP BASICALLY TAKING
12	RESPONSIBILITY FOR THAT. BUT JUST OUT OF THE GATE,
13	I REALLY AM NOT CLEAR ON WHAT VALUE THESE THREE
14	ACTIVITIES THAT WE'RE ELIMINATING REALLY DO BRING TO
15	GETTING THESE TRIALS UP AND UNDER WAY AND GETTING
16	DATA MONITORING GOING ON.
17	THE SECOND THING I'D LIKE DO IS, SINCE IT
18	WAS SENATOR TORRES THAT MADE THE MOTION, AS A
19	SECOND, JAMES, AM I ALLOWED TO AMEND THE MOTION?
20	THEN I MOVE TO AMEND THE MOTION TO DROP THE
21	REQUIREMENT FOR 100 PERCENT PARTICIPATION BY A PI TO
22	A SIGNIFICANT PARTICIPATION BY THE PI.
23	MR. HARRISON: DOES THE MAKER OF THE
24	MOTION ACCEPT THE FRIENDLY AMENDMENT?
25	MR. TORRES: CAN YOU REPEAT IT AGAIN?
	76

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1	DR. JUELSGAARD: I WANT TO ELIMINATE OR TO
2	MODIFY THE REQUIREMENT OF A HUNDRED PERCENT
3	PARTICIPATION BY A PRINCIPAL INVESTIGATOR IN THE
4	CIMC TO A SIGNIFICANT PARTICIPATION, THEREBY LEAVING
5	THE EXACT OBJECTIVE NUMBER OUT OF THIS AND INSTEAD
6	HAVING A MORE SUBJECTIVE MEASUREMENT.
7	MR. TORRES: SIGNIFICANT IS VERY
8	SUBJECTIVE. I DON'T KNOW IF I'M COMFORTABLE WITH
9	THAT. I WOULD DEFER TO DR. MILLS. DOES HE HAVE A
10	COMMENT?
11	DR. MILLS: I WOULD THINK THERE SHOULD BE
12	SOME MINIMUM REQUIREMENT OF TIME IF THEY'RE REALLY
13	GOING TO I DON'T KNOW IF 50 PERCENT IS
14	SUFFICIENT.
15	MR. TORRES: SO YOU'RE COMFORTABLE WITH
16	HIS AMENDMENT?
17	DR. MILLS: YES.
18	MR. TORRES: OKAY. I'M FINE THEN.
19	CHAIRMAN THOMAS: OKAY. ANY COMMENTS ON
20	THE
21	MS. LANSING: WE NEED I HAVE A
22	QUESTION. THIS IS SHERRY. IF DR. MILLS SAID 50
23	PERCENT CAN YOU HEAR ME?
24	CHAIRMAN THOMAS: YES.
25	MS. LANSING: DO WE NEED TO SAY NO LESS
	77
	77

1	THAN 50 PERCENT IN THE FRIENDLY AMENDMENT TO
2	DETERMINE WHAT SIGNIFICANT IS BECAUSE I FIND THAT A
3	VAGUE WORD.
4	DR. JUELSGAARD: I ACCEPT ADDING THAT
5	LANGUAGE, SIGNIFICANT PARTICIPATION, BUT NO LESS
6	THAN 50 PERCENT.
7	MS. LANSING: THAT WOULD MAKE ME VERY
8	COMFORTABLE. THANK YOU.
9	CHAIRMAN THOMAS: MR. SENATOR AGREES TO
10	THAT. YOU'RE JUST AN AMENABLE KIND OF GUY,
11	MR. SENATOR. ANY OTHER
12	DR. FRIEDMAN: NO LESS THAN 50 PERCENT OF
13	THE TIME HE'S AGREEABLE.
14	CHAIRMAN THOMAS: THANK YOU FOR
15	CLARIFYING, DR. FRIEDMAN. ANY OTHER COMMENTS ON
16	SENATOR TORRES NEVER MIND.
17	SO ANY COMMENTS ON THE AMENDED AMENDED
18	VERSION HERE? DR. FEIGAL.
19	DR. FEIGAL: I HATE TO BRING IT UP, BUT IN
20	WHAT WE THOUGHT WE PUBLISHED, MAYBE WE WERE WRONG,
21	WE THOUGHT THE MINIMUM WAS 30 PERCENT. SO I
22	WOULD SAY IT'S JUST SOMETHING WE GO BACK AND CHECK.
23	I DON'T RECALL IT SAYING REQUIRES A HUNDRED PERCENT
24	EFFORT BY THE PI. I'M JUST WONDERING WHAT WE
25	ACTUALLY PUT OUT. I'LL GO BACK AND LOOK.

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1	DR. JUELSGAARD: YOU LOOK UNDER THE SECOND
2	PARAGRAPH UNDER ELIGIBILITY, AND IT'S THE VERY LAST
3	SENTENCE IN THE SECOND PARAGRAPH. I'LL READ IT.
4	DR. MILLS: SO IT'S THE DIFFERENCE
5	BETWEEN IT'S THE DIFFERENCE BETWEEN THE CONCEPT
6	PLAN AND THE RFA, I THINK.
7	DR. JUELSGAARD: IT JUST SAID THE PI MUST
8	DEVOTE 100 PERCENT EFFORT TO ADMINISTRATION OF THE
9	CIMC.
10	DR. MILLS: IT SAYS 30 FOR THE ALPHA
11	CLINICS, BUT IT'S A HUNDRED FOR THE CIMC. THAT'S
12	WHERE THE CONFUSION IS.
13	DR. FEIGAL: FINE.
14	DR. MILLS: I DON'T KNOW HOW IT HAPPENED,
15	BUT THE CONCEPT PLAN REALLY SHOULD BE THE GUIDING
16	FOR IT. AND IT WAS A HUNDRED AND THE CONCEPT PLAN
17	WAS CHANGED TO 30. SO IF IT SHOULD BE LOWER, WE
18	SHOULD HAVE IT LOWER IN THE CONCEPT PLAN BECAUSE
19	THAT REALLY SHOULD BE THE GUIDING DOCUMENT.
20	CHAIRMAN THOMAS: HAVE A COMMENT FROM THE
21	PUBLIC.
22	DR. NYLAND: THANK YOU. JOYCE NYLAND,
23	CITY OF HOPE. I THINK IT WAS 30 IN THE LAST RFA.
24	AND IN MY MIND THAT WOULD BE THE MOST REASONABLE
25	FIGURE TO PUT AS A MINIMUM. YOU CERTAINLY COULD
	70

1	COME IN WITH MORE, AND YOU MAY WANT IT TO SCALE OVER
2	TIME, BUT I THINK 30 PERCENT IS A GOOD MINIMUM
3	STARTING POINT FOR PEOPLE WHO ALREADY HAVE
4	ACTIVITIES. THEY WOULD NEED TO BEGIN TO SLOWLY
5	MERGE AND BECOME MORE FOCUSED ON THIS INITIATIVE
6	OVER TIME.
7	CHAIRMAN THOMAS: THANK YOU. DR. MILLS,
8	DO YOU HAVE THOUGHTS ON THAT LAST COMMENT?
9	DR. MILLS: MY BIGGEST ISSUE IS THAT THE
10	CONCEPT PLAN AND THE RFA END UP BEING CONSISTENT. I
11	DON'T LIKE IT WHEN THE BOARD APPROVES SOMETHING AND
12	THE RFA IS DIFFERENT.
13	CHAIRMAN THOMAS: OKAY. WITH SPECIFIC
14	RESPECT TO THE COMMENT THERE OF A 30-PERCENT NUMBER,
15	WHAT IS YOUR COMMENT?
16	DR. MILLS: IF THAT'S WORKABLE. IF THAT'S
17	MORE WORKABLE AND IT OPENS IT'S A FAIRLY
18	SIGNIFICANT AMOUNT OF TIME FOR A BUSY PI. THAT IS
19	FOR SURE.
20	CHAIRMAN THOMAS: SENATOR TORRES.
21	MR. TORRES: YOU KNOW, IN MANY OF THE
22	GRANT REVIEWS, SOME OF WHICH YOU WERE PRESENT AS A
23	REVIEWER, PEOPLE WOULD FUDGE ON THEIR APPLICATIONS,
24	AND THEN THAT FUDGING WAS CAUGHT BY ONE OR TWO OF
25	THE REVIEWERS SAYING THERE'S NO WAY THAT THIS PI CAN

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1	SPEND THIS AMOUNT OF TIME BECAUSE I KNOW HE OR SHE
2	HAS OTHER PROJECTS THAT THEY'RE WORKING ON. SO I'M
3	REALLY CONCERNED ABOUT MAKING SURE THAT THE LEVEL IS
4	HIGHER THAN 30 PERCENT BECAUSE OF THAT ISSUE. AND
5	MANY TIMES WE'LL HAVE SOME OF THESE PI'S WHO PUT
6	TEAMS TOGETHER THAT IT'S INCONCEIVABLE HOW THEY
7	COULD SPEND EVEN 1 PERCENT OF THEIR TIME ON THIS
8	PARTICULAR GRANT THAT WAS UNDER REVIEW.
9	SO I'M JUST CONCERNED THAT WE HAVE THE
10	HIGHEST STANDARD POSSIBLE IN COMPLIANCE WITH STEVE
11	AND OTHER COMMENTS. AND I HOPE THAT WORKS. I AGREE
12	WITH THE CONSISTENCY IN ALL OF THE PLANS, BUT I DO
13	THINK THAT LEVEL OF COMMITMENT HAS TO BE HIGHER.
14	DR. MILLS: ELLEN, DO YOU HAVE A THOUGHT
15	ON 30 VERSUS 50?
16	DR. FEIGAL: WELL, I JUST WANT TO SAY THE
17	SAME DISCUSSION CAME UP DURING THE ORIGINAL CONCEPT
18	DISCUSSION, AND A QUESTION THE EXACT QUESTION WAS
19	RAISED. WE DID DISCUSS IT. PERHAPS IT WASN'T
20	CAPTURED IN THE MINUTES. I DON'T KNOW. BUT IT WAS
21	AGREED TO STAY AT LEAST A MINIMUM OF 30. 30 PERCENT
22	IS A REQUIREMENT WE HAVE FOR ALL OF OUR OTHER
23	AWARDS. I JUST WANT TO LET PEOPLE KNOW THAT IS
24	INCONSISTENT WITH OTHER REQUIREMENTS IN OTHER AWARDS
25	FOR PI. SO I THINK SETTING A MINIMUM IS CRUCIAL.
	0.1

1	I DO AGREE YOU COULD SET IT HIGHER IF YOU
2	WANT, BUT 30 PERCENT HAS BEEN THE GENERAL MINIMUM
3	THAT WE REQUIRE FOR PRINCIPAL INVESTIGATORS.
4	CHAIRMAN THOMAS: MR. SHEEHY.
5	MR. SHEEHY: I ACTUALLY AM IN CONCERT WITH
6	SENATOR TORRES. AND I'VE HAD THIS SAME EXPERIENCE
7	IN THE WORKING GROUP. AND I THINK \$10 MILLION, I
8	WANT A HALF-TIME PARTICIPATION BY THE LEADER OF THAT
9	GROUP. I MEAN THAT'S NOT UNREASONABLE FOR A \$10
10	MILLION BUDGET. AND IF THIS IS AS SIGNIFICANT OF A
11	PROJECT AS EVERYBODY SUGGESTS THAT IT IS, THEN I
12	THINK SOMEONE BEING WILLING TO MAKE THAT KIND OF
13	COMMITMENT IS AN IMPORTANT FACET OF IT. SO I WOULD
14	BE SUPPORTIVE OF THE 50 PERCENT.
15	CHAIRMAN THOMAS: ANY OTHER COMMENTS FROM
16	MEMBERS OF THE BOARD? DR. BRYANT.
17	DR. BRYANT: I WOULD BE A LITTLE CONCERNED
18	ABOUT MAKING IT 50 PERCENT IF YOU ARE TALKING ABOUT
19	ACADEMICS BECAUSE THEY HAVE A VERY DIVIDED LIFE.
20	THEY HAVE TO TEACH, THEY HAVE TO DO OTHER THINGS.
21	AND 30 PERCENT TURNS OUT TO BE A PRETTY BIG
22	COMMITMENT FOR A RESEARCH PROGRAM. AND IT'S NOT
23	THAT THEY DO EVERYTHING THEMSELVES, BUT THEY OVERSEE
24	RESEARCH PROGRAMS. SO I THINK 30 PERCENT AS A BASE,
25	BOTTOM, NO LESS THAN WOULD BE OKAY WITH ME. SO I'M
	82

1	JUST RAISING THAT AS AN ISSUE.
2	CHAIRMAN THOMAS: MR. JUELSGAARD.
3	DR. JUELSGAARD: A QUESTION OF MR.
4	HARRISON. SO, MR. HARRISON, CAN I MODIFY MY
5	PROPOSED AMENDMENT?
6	MR. HARRISON: YOU MAY IF SENATOR TORRES
7	ACCEPTS A FRIENDLY AMENDMENT AND IF
8	MR. TORRES: I PUT MY POSITION OUT THERE,
9	SO I'D RATHER HAVE THAT VOTED UP OR DOWN GIVEN THE
10	DISCUSSION, AND EVERYBODY IS FREE TO VOTE THE WAY
11	THEY WANT TO. I JUST FEEL THAT WAS THE EXPERIENCE
12	THAT I'VE HAD OVER THE LAST FIVE YEARS, AND I AGREE
13	WITH JEFF BECAUSE HE'S HAD THE SAME EXPERIENCE.
14	MR. HARRISON: SO, MR. JUELSGAARD, THERE
15	ARE TWO OPTIONS. ONE IS THE FRIENDLY AMENDMENT.
16	FAILING THAT, YOU HAVE THE OPPORTUNITY TO MAKE A
17	MOTION TO AMEND THE MOTION THAT'S ON THE TABLE, AND
18	THAT MOTION WILL TAKE PRECEDENCE OVER THE PENDING
19	MOTION.
20	MR. TORRES: RIGHT. HIS MOTION IS UP
21	FIRST.
22	DR. JUELSGAARD: I'M CONFUSED. SO REPEAT
23	THE SECOND PART. ALL RIGHT. SO WHAT I'VE GOT IS
24	SENATOR TORRES DOESN'T LIKE THE FACT THAT I GO ANY
25	LOWER THAN 50 PERCENT, AND SO HE WON'T ACCEPT A

1	REVISION OF MY FRIENDLY AMENDMENT.
2	CHAIRMAN THOMAS: HIS AMENABILITY ONLY
3	GOES SO FAR.
4	MR. HARRISON: SO YOUR SECOND OPTION
5	DR. JUELSGAARD: THE LINES ARE DRAWN. SO
6	WHAT'S THE SECOND ALTERNATIVE?
7	MR. HARRISON: YOUR SECOND OPTION IS TO
8	MAKE A MOTION TO AMEND THE PENDING MOTION. AND IF
9	YOU OBTAIN A SECOND FOR THAT MOTION, IT WILL TAKE
10	PRECEDENCE. THAT IS, THE BOARD WILL VOTE FIRST ON
11	THE AMENDMENT BEFORE VOTING ON THE MAIN MOTION.
12	DR. JUELSGAARD: ALL RIGHT. SO I DON'T
13	NEED SENATOR TORRES'S
14	MR. HARRISON: YOU DO NOT.
15	DR. JUELSGAARD: OKAY. GREAT. I SO MOVE,
16	THEN, THAT WE AMEND THE MOTION TO REQUIRE A MINIMUM
17	OF 30 PERCENT OF A PI'S PARTICIPATION IN THE CIMC.
18	DR. FRIEDMAN: I SECOND IT.
19	MS. LANSING: I AM SO CONFUSED. SOMEBODY
20	HAS TO EXPLAIN TO ME WHAT WE'RE DOING. ARE WE THEN
21	NOT GOING WITH WHAT CHAIRMAN MILLS ASKED FOR, WHICH
22	IS NO LESS THAN 50 PERCENT, OR IS THIS A WHOLE OTHER
23	THING?
24	DR. MILLS: IS THAT SHERRY?
25	MS. LANSING: YEAH. PLEASE EXPLAIN.
	84
	04

1	DR. MILLS: FIRST OF ALL, SHERRY, THANK
2	YOU FOR THE PROMOTION. J.T. IS A LITTLE CONCERNED.
3	MS. LANSING: SORRY. PRESIDENT. I'M
4	SORRY. I APOLOGIZE.
5	DR. MILLS: I AM I DON'T HAVE A STRONG
6	OPINION ON 30 VERSUS 50. I WOULD HAVE I WOULD BE
7	AGAINST ANYTHING LOWER THAN 30, I THINK, AT THAT
8	POINT.
9	MS. LANSING: BUT INITIALLY YOU SAID 50.
10	DR. MILLS: I SAID ABOUT 50, BUT IT'S
11	IT IS A LOT OF TIME PARTICULARLY FOR A PHYSICIAN PI
12	WHO ALSO HAS TO TEACH.
13	MS. LANSING: I GUESS WHAT I'M LOOKING FOR
14	AS A PATIENT ADVOCATE, BECAUSE I SO RESPECT YOU, IS
15	WHAT THE WORD "SIGNIFICANT" BOTHERS ME BECAUSE
16	IT'S NOT SPECIFIC, AND I DON'T LIKE THE SUBJECTIVITY
17	OF IT. SO WHAT IS THE NUMBER THAT YOU ARE
18	COMFORTABLE WITH SO THAT I CAN SUPPORT THE MOTION
19	BECAUSE I SUPPORT THE CONCEPT. I'M JUST LOOKING FOR
20	THE NUMBER THAT YOU FEEL COMFORTABLE WITH.
21	DR. MILLS: A MINIMUM OF 30 PERCENT.
22	MS. LANSING: OKAY. THEN I WITHDRAW MY
23	FRIENDLY AMENDMENT IF THAT MAKES IT EASIER FOR
24	EVERYBODY.
25	MR. TORRES: I WITHDRAW MY MOTION.
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1	CHAIRMAN THOMAS: OKAY. SO WE HAVE A
2	MOTION FROM MR. JUELSGAARD WITH NO LESS THAN A
3	MINIMUM OF 30 PERCENT. SENATOR TORRES WITHDRAWS HIS
4	MOTION. MR. JUELSGAARD'S MOTION WAS SECONDED IN A
5	TIE VOTE BY DR. BURTIS AND DR. FRIEDMAN. DO WE HAVE
6	OTHER COMMENTS ON MR. JUELSGAARD'S MOTION FROM
7	MEMBERS OF THE BOARD EITHER IN THE ROOM OR ON THE
8	PHONE?
9	DR. PRIETO.
10	DR. PRIETO: SO JUST TO CLARIFY, THEN THIS
11	BECOMES THE ONLY MOTION ON THE TABLE AND THE ONLY
12	MINIMUM THAT WE WOULD BE SETTING, OR WE COULD
13	LATER IF THIS FAILS, WE COULD THEN MAKE ANOTHER
14	MOTION.
15	CHAIRMAN THOMAS: YOU ARE ALWAYS FREE, IF
16	THIS FAILS, TO COME BACK WITH ANOTHER MOTION. AT
17	THE MOMENT THIS IS THE ONLY MOTION. THERE ARE NO
18	SUBMOTIONS, NO SUB, SUBAMENDED MOTIONS. THERE'S ONE
19	MOTION, MR. JUELSGAARD'S.
20	COMMENTS FROM MEMBERS OF THE PUBLIC?
21	HEARING NONE, MR. HARRISON, WILL YOU PLEASE TELL US
22	WHAT THE MOTION IS?
23	MR. HARRISON: OKAY. THE MOTION IS TO
24	AMEND THE MAIN MOTION, AND JUST TO RESTATE THE MAIN
25	MOTION WAS TO APPROVE THE REVISED CIMC CONCEPT
	86
	An An

1	PROPOSAL WITH A MODIFICATION OF THE REQUIREMENT FOR
2	100 PERCENT EFFORT BY THE PI TO SIGNIFICANT
3	PARTICIPATION BY THE PI, BUT NO LESS THAN 50 PERCENT
4	EFFORT. THE AMENDMENT PROPOSED BY MR. JUELSGAARD IS
5	TO REQUIRE A MINIMUM OF 30 PERCENT EFFORT BY THE PI
6	FOR THE CIMC PROPOSAL.
7	MS. LANSING: AND I'VE WITHDRAWN THE 50
8	PERCENT. SO THERE'S REALLY ONLY ONE MOTION ON THE
9	TABLE, AT THE ADVICE OF PRESIDENT MILLS.
10	CHAIRMAN THOMAS: THANK YOU, SHERRY.
11	MR. HARRISON: SO JUST TO BE CLEAR, A YES
12	VOTE MEANS THAT YOU SUPPORT A 30-PERCENT MINIMUM
13	EFFORT BY THE PI FOR THE CIMC PROPOSAL.
14	CHAIRMAN THOMAS: OKAY. MARIA, WILL YOU
15	PLEASE TAKE THE ROLL?
16	MS. BONNEVILLE: SUE BRYANT.
17	DR. BRYANT: YES.
18	MS. BONNEVILLE: KEN BURTIS.
19	DR. BURTIS: YES.
20	MS. BONNEVILLE: ELIZABETH FINI.
21	DR. FINI: YES.
22	MS. BONNEVILLE: MICHAEL FRIEDMAN.
23	DR. FRIEDMAN: YES.
24	MS. BONNEVILLE: JUDY GASSON.
25	DR. GASSON: YES.
	0.7
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1	MS. BONNEVILLE: STEVE JUELSGAARD.
2	DR. JUELSGAARD: YES.
3	MS. BONNEVILLE: SHERRY LANSING.
4	MS. LANSING: YES.
5	MS. BONNEVILLE: SHLOMO MELMED.
6	DR. MELMED: YES.
7	MS. BONNEVILLE: LAUREN MILLER.
8	MS. MILLER: YES.
9	MS. BONNEVILLE: LLOYD MINOR.
10	DR. MINOR: YES.
11	MS. BONNEVILLE: JOE PANETTA.
12	MR. PANETTA: YES.
13	MS. BONNEVILLE: FRANCISCO PRIETO.
14	DR. PRIETO: AYE.
15	MS. BONNEVILLE: ROBERT QUINT.
16	DR. QUINT: YES.
17	MS. BONNEVILLE: AL ROWLETT.
18	MR. ROWLETT: YES.
19	MS. BONNEVILLE: JEFF SHEEHY.
20	MR. SHEEHY: YES.
21	MS. BONNEVILLE: OS STEWARD.
22	DR. STEWARD: YES.
23	MS. BONNEVILLE: JONATHAN THOMAS.
24	CHAIRMAN THOMAS: YES.
25	MS. BONNEVILLE: ART TORRES.
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	DATE OF THE SERVE OF
1	MR. TORRES: NO.
2	MS. BONNEVILLE: CARL WARE.
3	DR. WARE: YES.
4	MS. BONNEVILLE: DIANE WINOKUR.
5	MS. WINOKUR: YES.
6	MR. HARRISON: THAT MOTION CARRIES.
7	CHAIRMAN THOMAS: OKAY. THANK YOU. AND,
8	DR. MILLS, THANK YOU. THE BOARD SHOULD UNDERSTAND
9	THAT DR. MILLS HAS SPENT A TREMENDOUS AMOUNT OF TIME
10	TALKING TO FOLKS, CONTEMPLATING WHAT THE RIGHT THING
11	IS TO DO HERE WITH RESPECT TO THIS ISSUE. AND
12	THOUGH IT CULMINATES IN I'M GETTING THE HEAD
13	WAGON HERE. WE HAVE ANOTHER MOTION, MR. HARRISON?
14	MR. HARRISON: WE NEED TO TAKE UP THE MAIN
15	MOTION NOW, WHICH IS WITH THE APPROVED AMENDMENT.
16	SO THE MOTION THAT IS CURRENTLY ON THE TABLE IS TO
17	APPROVE THE CIMC CONCEPT PROPOSAL WITH A
18	MODIFICATION OF THE REQUIREMENT FOR 100 PERCENT BY
19	THE PI TO NO LESS THAN 30-PERCENT EFFORT.
20	CHAIRMAN THOMAS: OKAY. AND JUST TO BE
21	CLEAR, WHO MADE THAT ORIGINAL MOTION?
22	MR. HARRISON: ORIGINAL MOTION WAS MADE BY
23	SENATOR TORRES AND MR. JUELSGAARD.
24	CHAIRMAN THOMAS: OKAY. IS EVERYBODY
25	CLEAR ON THAT?
	89

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1	MS. LANSING: YES.
2	CHAIRMAN THOMAS: OKAY. MARIA.
3	MS. BONNEVILLE: SUE BRYANT.
4	DR. BRYANT: YES.
5	MS. BONNEVILLE: KEN BURTIS.
6	DR. BURTIS: YES.
7	MS. BONNEVILLE: ELIZABETH FINI.
8	DR. FINI: YES.
9	MS. BONNEVILLE: MICHAEL FRIEDMAN.
10	DR. FRIEDMAN: YES.
11	MS. BONNEVILLE: JUDY GASSON.
12	DR. GASSON: YES.
13	MS. BONNEVILLE: STEVE JUELSGAARD.
14	DR. JUELSGAARD: YES.
15	MS. BONNEVILLE: SHERRY LANSING.
16	MS. LANSING: YES.
17	MS. BONNEVILLE: SHLOMO MELMED.
18	DR. MELMED: YES.
19	MS. BONNEVILLE: LAUREN MILLER.
20	MS. MILLER: YES.
21	MS. BONNEVILLE: LLOYD MINOR.
22	DR. MINOR: YES.
23	MS. BONNEVILLE: JOE PANETTA.
24	MR. PANETTA: YES.
25	MS. BONNEVILLE: FRANCISCO PRIETO.
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1	DR. PRIETO: AYE.
2	MS. BONNEVILLE: ROBERT QUINT.
3	DR. QUINT: YES.
4	MS. BONNEVILLE: AL ROWLETT.
5	MR. ROWLETT: YES.
6	MS. BONNEVILLE: JEFF SHEEHY.
7	MR. SHEEHY: YES.
8	MS. BONNEVILLE: OS STEWARD.
9	DR. STEWARD: YES.
10	MS. BONNEVILLE: JONATHAN THOMAS.
11	CHAIRMAN THOMAS: YES.
12	MS. BONNEVILLE: ART TORRES.
13	MR. TORRES: AYE.
14	MS. BONNEVILLE: CARL WARE.
15	DR. WARE: YES.
16	MS. BONNEVILLE: DIANE WINOKUR.
17	MS. WINOKUR: YES.
18	MR. HARRISON: THE MOTION CARRIES
19	UNANIMOUSLY.
20	CHAIRMAN THOMAS: OKAY. NOW, WE SURE
21	THERE'S NOTHING ELSE? THERE ARE NO OTHER MOTIONS;
22	THEY'RE NO OKAY. SO. AGAIN, DR. MILLS, THANK
23	YOU FOR YOUR IN-DEPTH ANALYSIS OF THIS ISSUE AND
24	YOUR WILLINGNESS TO TAKE THE TIME TO SPEAK TO A
25	GREAT MANY PEOPLE ON THE SUBJECT TO INFORM YOUR
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1	CONCLUSIONS. WE APPRECIATE IT, AND WE WILL MOVE
2	FORWARD ACCORDINGLY AS VOTED ON HERE BY THE BOARD.
3	LET'S TAKE A FIVE-MINUTE BREAK. LINDA'S
4	FINGERS ARE ABOUT TO FALL OFF. WE'LL RECONVENE
5	SHORTLY.
6	(A RECESS WAS TAKEN.)
7	CHAIRMAN THOMAS: SO GOING TO RECONVENE.
8	HOPEFULLY MEMBERS ON THE PHONE HAVE ENJOYED AN EARLY
9	LUNCH AS WELL. IT WAS QUITE TASTY ON THIS END.
10	DR. WARE: NO. BUT I'M HUNGRY LISTENING
11	TO Y'ALL.
12	CHAIRMAN THOMAS: WE'RE GOING TO
13	PROCEED WE'RE GOING TO CONTINUE NOW WITH ITEM 11,
14	CONSIDERATION OF BRIDGE FUNDING FOR RFA 10-01, CIRM
15	EARLY TRANSLATIONAL II RESEARCH AWARD APPLICATION
16	NO. 01768. DR. OLSON.
17	DR. OLSON: THANK YOU, MR. CHAIRMAN. WHAT
18	I'M GOING TO DO IS GIVE YOU AN OVERVIEW OF THE
19	BRIDGING FUNDING PROGRAM BECAUSE IT'S ACTUALLY
20	APPLICABLE TO BOTH AGENDA ITEMS 11 AND 12.
21	I WILL VERY BRIEFLY INTRODUCE EACH OF THE
22	TWO APPLICATIONS THAT ARE UP FOR YOUR CONSIDERATION
23	TODAY, AND THEN IF YOU HAVE FURTHER QUESTIONS ABOUT
24	ANY OF THEM, I'M HERE TO ANSWER ABOUT THE ONE AND
25	DR. KATHERINE PRIEST WILL ANSWER ABOUT THE OTHER.
	0.3

1	SO, AGAIN, FIRST, I'M JUST GOING TO START
2	WITH AN INTRODUCTION. WHAT THE BRIDGING SUPPLEMENT
3	AWARDS WAS ALL ABOUT WAS TRYING TO KEEP OUR MOST
4	PROMISING PROGRAMS MOVING. AND IN DECEMBER OF 2001,
5	THE BOARD APPROVED THIS CONCEPT AND A TOTAL OF \$12
6	MILLION FOR THE SUPPLEMENTS. SO THE PROGRAM GOAL IS
7	REALLY TO ACCELERATE THE DEVELOPMENT OF THESE STEM
8	CELL THERAPIES BY PROVIDING A FUNDING MECHANISM THAT
9	ALLOWS FOR REALLY THE SEAMLESS ADVANCEMENT OF
10	PROMISING CIRM-FUNDED TRANSLATIONAL AND DEVELOPMENT
11	PROJECTS TO AND THROUGH CLINICAL DEVELOPMENT.
12	AS YOU KNOW, WE OFFER RFA'S ON A FAIRLY
13	PERIODIC BASIS, BUT MANY TIMES THEY ARE NOT TIMED
14	SUCH THAT THEY PRECISELY OVERLAP WITH THE PRECEDING
15	AWARD. AND WHEN YOU HAVE REALLY PROMISING RESEARCH,
16	YOU WOULD LIKE TO KEEP IT MOVING, YOU WOULD LIKE TO
17	KEEP THE TEAM TOGETHER, YOU WOULD LIKE TO KEEP
18	ACTIVITIES GOING. SO THAT WAS THE POINT OF IT. AND
19	IT'S A BRIDGE TO FUTURE FUNDING, WHETHER IT'S
20	ACTUALLY CIRM FUNDING, WHETHER IT'S VENTURE CAPITAL
21	FUNDING, WHETHER IT'S OTHER FOUNDATIONS OR NIH
22	FUNDING. SO REALLY THE GOAL WAS TO TRY AND KEEP IT
23	GOING.
24	THE PROJECT ELIGIBILITY AND SCOPE, IT IS
25	OPEN TO PROMISING PROJECTS FROM CIRM TRANSLATIONAL
	0.3

1	AND DEVELOPMENT AWARD PROGRAMS THAT SHOW GOOD
2	PROGRESS ON THE PROJECT, THAT ARE ACTIVE AT THE TIME
3	OF CIRM APPROVAL FOR SUBMISSION OF A FULL
4	APPLICATION, AND WE'RE PARTICULARLY INTERESTED IN
5	THOSE PROJECTS THAT ADDRESS AN UNMET MEDICAL NEED.
6	THE FUNDING IS UP TO \$3 MILLION FOR
7	INDIVIDUAL TOTAL PROJECT COST IN EXCEPTIONAL
8	CIRCUMSTANCES. I WOULD EXPECT MORE ROUTINELY, SINCE
9	THESE AWARDS ARE REALLY ONLY FOR 12 MONTHS OR SO,
10	THAT IT TO BE LESS THAN A MILLION DOLLARS. AND AS I
11	ALREADY NOTED, \$12 MILLION WAS ALLOCATED TO THE
12	PROGRAM.
13	THE APPLICATION AND REVIEW PROCESS THAT
14	WAS OUTLINED AT THE TIME OF THE CONCEPT IS THE PI
15	SUBMITS A BRIEF PROPOSAL THAT SUMMARIZES THE
16	PROPOSED RESEARCH, ADDRESS HOW IT MEETS THE GOAL OF
17	THE BRIDGING FUNDING PROGRAM. THE PROPOSAL IS
18	ASSESSED INTERNALLY BY OUR CIRM TEAM FOR ELIGIBILITY
19	AND RESPONSIVENESS. THE CIRM PRESIDENT ACTUALLY
20	MAKES THE DECISION TO INVITE SUBMISSION OF A FULL
21	APPLICATION UPON REVIEW OF THE PROPOSAL AND WITH
22	INPUT FROM TEAM MEMBERS.
23	IF INVITED, THE PI SUBMITS A FULL
24	APPLICATION. THE FULL APPLICATION IS REVIEWED BY
25	EXTERNAL EXPERTS IF THE PROPOSED ACTIVITIES ARE

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1	WITHIN THE SCOPE OF THE ORIGINAL AWARD OR RFA AND BY
2	THE GRANTS WORKING GROUP, IF THE PROPOSED ACTIVITIES
3	ARE OUTSIDE THE SCOPE OF THE ORIGINAL AWARD OR RFA,
4	OR IF THE FUNDING IS HIGHER THAN A MILLION DOLLARS.
5	THE ICOC APPLICATION REVIEW SUBCOMMITTEE
6	DOES MAKE ALL FUNDING DECISIONS IN ALL INSTANCES.
7	THE REVIEW CRITERIA RECAPITULATES OUR
8	FAIRLY STANDARD REVIEW CRITERIA. IT IS MADE MORE
9	SPECIFIC FOR THE PARTICULAR TYPE OF APPLICATION. IF
10	IT'S A TRANSLATIONAL TYPE OF APPLICATION VERSUS
11	DEVELOPMENT, IT MAY HAVE MORE SPECIFICS. BUT
12	IMPACT, SIGNIFICANCE, AND RESPONSIVENESS,
13	FEASIBILITY, WHICH ADDRESS THE WORK THAT WAS DONE ON
14	THE PARENT AWARD AND THE PROGRESS ON THE PARENT
15	AWARD, DESIGN OF THE PROPOSED STUDIES, AND WHAT THEY
16	ARE THAT WILL BE CONTEMPLATED IN THE SUPPLEMENT.
17	WHO IS GOING TO WORK ON THIS PROGRAM? ARE THERE
18	NECESSARY COLLABORATIONS IN PLACE AND THE RESOURCES
19	AND ENVIRONMENT? AS I NOTED, ADDITIONAL SPECIFIC
20	CRITERIA MAY APPLY DEPENDING ON THE NATURE OF THE
21	PROPOSAL.
22	SO NOW I'D LIKE TO ADDRESS, I BELIEVE,
23	AGENDA ITEM NO. 11, AND ALL I'M GOING TO DO IS JUST
24	GIVE YOU A VERY BRIEF HIGHLIGHT OF WHAT IT IS. IF
25	YOU WANT MORE INFORMATION, I'M HAPPY TO ADDRESS THE
	O.E.

1	REVIEW SUMMARY. BUT THE PARENT AWARD WAS TO DEVELOP
2	AN ANIMAL COMPONENT FREE AND FEEDER FREE CULTURE
3	SYSTEM FOR THE EXPANSION OF AUTOLOGOUS LIMBAL STEM
4	CELLS TO TREAT LIMBAL CELL DEFICIENCY, STEM CELL
5	DEFICIENCY. AND THIS IS A BLINDING DISORDER THAT'S
6	CAUSED BY CHEMICAL OR BY CORNEAL INJURY OFTEN IN
7	RESPONSE TO CHEMICAL ACCIDENTS, BUT IT CAN ALSO BE
8	ACTUALLY IN SOME SITUATIONS OF CONJUNCTITIS, SEVERE
9	CONJUNCTITIS. SO IT DOES HAPPEN.
10	THERE'S A REQUEST FOR BRIDGING FUNDING TO
11	CONDUCT STUDIES TO FURTHER ASSESS AND OPTIMIZE THE
12	REPRODUCIBILITY OF THE KEY COMPONENTS THAT WERE
13	IDENTIFIED IN THE PARENT APPLICATION. THE REQUESTED
14	FUNDING IS ESSENTIALLY \$700,000. IT WAS REVIEWED BY
15	THREE EXTERNAL EXPERTS. AND AFTER DISCUSSION WITH
16	THEM, THE AVERAGE SCORE WAS 80. IT'S A TIER I.
17	CIRM ALSO RECOMMENDS THAT WE FUND THIS
18	APPLICATION. I WILL REMIND YOU THAT ACTUALLY LIMBAL
19	STEM CELL EXPANSION IS PERFORMED IN ITALY. DR.
20	PELEGRINI AND DELUCA HAVE ACTUALLY NOW PUBLISHED
21	TEN-YEAR FOLLOW-UP STUDIES OF THIS, AND IT IS
22	REMARKABLY SUCCESSFUL WITH CERTAIN CONDITIONS WHICH
23	ESSENTIALLY THE PI OF THIS AWARD HAS USED, NOT THEIR
24	CONDITIONS, BUT THE FACT THAT IF YOU HAVE GREATER
25	THAN 3 PERCENT OF THIS PARTICULAR MARKER, THEN IT
	96

1	ENGRAFTS. SO OUR PI HAS USED THAT AS AN ASSAY TO
2	ESSENTIALLY DEVELOP THE CONDITIONS FOR DOING THE
3	ANIMAL COMPONENT FREE. BUT IT IS CLINICALLY
4	VALIDATED, SO YOU HAVE SOMETHING THAT, IF IT'S SAFE
5	ENOUGH TO MEET THE FDA'S REQUIREMENTS, IT IS A WAY
6	TO MOVE FORWARD QUICKLY TO BRING THIS TO PATIENTS IN
7	THE U.S. WHO HAVE NO ACCESS TO IT.
8	SO THAT IS, I BELIEVE, AGENDA ITEM 11, THE
9	ONE THAT'S UP FOR CONSIDERATION. MR. CHAIRMAN,
10	WOULD YOU LIKE ME TO JUST GIVE A HIGH LEVEL SUMMARY
11	OF THE NEXT APPLICATION, OR WOULD YOU PREFER TO ACT
12	ON THIS ONE FIRST?
13	CHAIRMAN THOMAS: I THINK WE NEED TO TAKE
14	THESE ONE AT A TIME. DO I HAVE A MOTION TO APPROVE
15	THIS ITEM?
16	MR. SHEEHY: I KNOW IT'S BECAUSE THE
17	DODGERS ARE IN SECOND PLACE RIGHT NOW. THAT'S GOT
18	TO BE IT.
19	CHAIRMAN THOMAS: THAT'S A REALLY CHEAP
20	SHOT. AND I KNOW THAT MR. JUELSGAARD SECONDS THAT
21	SENTIMENT, WHICH TROUBLES ME EQUALLY AS DEEPLY.
22	MR. SHEEHY.
23	MR. SHEEHY: WE'LL SEE HOW THE WEEKEND
24	GOES, BY THE WAY. I'M A LITTLE NERVOUS. WE'VE GOT
25	YOUR THREE BEST PITCHERS COMING TO TOWN.
	0.7

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1	SO AS USUAL, THE FIRST ORDER OF BUSINESS
2	WOULD BE TO SEE IF THERE'S A MOTION TO ACCEPT THE
3	RECOMMENDATION. COULD I JUST CONFIRM WITH THE
4	PRESIDENT, YOU'RE SUPPORTIVE OF THIS MOVING FORWARD?
5	DR. MILLS: ABSOLUTELY.
6	MR. SHEEHY: SO DO WE HAVE A MOTION?
7	MR. TORRES: SO MOVED.
8	MR. SHEEHY: DO WE HAVE A SECOND?
9	DR. FRIEDMAN: SECOND.
10	MR. SHEEHY: DO WE HAVE ANY PUBLIC
11	COMMENT? COULD WE CALL THE CALL THE ROLL,
12	PLEASE.
13	MS. BONNEVILLE: STEVE JUELSGAARD. LAUREN
14	MILLER.
15	MS. MILLER: YES.
16	MS. BONNEVILLE: JOE PANETTA.
17	MR. PANETTA: YES.
18	MS. BONNEVILLE: FRANCISCO PRIETO.
19	DR. PRIETO: AYE.
20	MS. BONNEVILLE: ROBERT QUINT.
21	DR. QUINT: YES.
22	MS. BONNEVILLE: AL ROWLETT.
23	MR. ROWLETT: YES.
24	MS. BONNEVILLE: JEFF SHEEHY.
25	MR. SHEEHY: YES.
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1	MS. BONNEVILLE: OS STEWARD. JONATHAN
2	THOMAS.
3	CHAIRMAN THOMAS: YES.
4	MS. BONNEVILLE: ART TORRES.
5	MR. TORRES: AYE.
6	MS. BONNEVILLE: DIANE WINOKUR.
7	MS. WINOKUR: YES.
8	MR. HARRISON: MOTION CARRIES.
9	MR. SHEEHY: DR. OLSON, ARE YOU GOING TO
10	PRESENT THE NEXT ONE?
11	DR. OLSON: THANK YOU. SO, AGAIN, I WOULD
12	LIKE TO JUST GIVE A VERY HIGH LEVEL OUTLINE OF THE
13	NEXT ONE. AND IF YOU WANT MORE SPECIFIC DISCUSSION
14	ABOUT THE REVIEW SUMMARY, DR. PRIEST IS AVAILABLE TO
15	DO THAT.
16	SO THIS IS AWARD 1841. THE PARENT AWARD
17	WAS TO AND THIS WAS AN EARLY TRANSLATIONAL
18	AWARD WAS TO IDENTIFY AN HESC-DERIVED NEURAL STEM
19	CELL OR PROGENITOR CELL DEVELOPMENT CANDIDATE TO
20	TREAT HUNTINGTON'S DISEASE. AND I THINK AS WE ALL
21	KNOW, THIS IS A NEURAL DEGENERATIVE DISEASE FOR
22	WHICH THERE ARE NO DISEASE MODIFYING TREATMENTS.
23	THE REQUEST FOR BRIDGING FUNDING IS TO
24	TEST THE CANDIDATE HESC, MSC DEVELOPMENT CANDIDATE
25	TO FURTHER ESTABLISH DOSE RANGE. AND IN MODELS OF
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	99

1	HUNTINGTON'S DISEASE THAT HAVE A SLOWER ONSET THAN
2	THE VERY AGGRESSIVE R6/2 MODEL, IN ORDER TO ASSESS
3	OVER TIME AND IN PERHAPS A SOMEWHAT MORE RELEVANT
4	SETTING NOW IT'S IN A MOUSE. A YEAR IN A MOUSE
5	IS MORE THAN IS LIKE PROBABLY MORE RELEVANT
6	BECAUSE IT'S HALF OF A MOUSE LIFETIME SO ASSESS
7	OVER TIME SELF-SURVIVAL AND FUNCTIONAL OUTCOMES.
8	THE REQUESTED FUNDING IS FOR \$505,000. IT
9	WAS REVIEWED BY EXTERNAL EXPERTS, FOUR OF THEM. THE
10	AVERAGE SCORE IS 72, WHICH PLACES THIS IN TIER II.
11	THERE IS A CIRM RECOMMENDATION ON THIS ONE AS WELL,
12	WHICH IS TO FUND. AND THE RATIONALE FOR THIS IS IT
13	FURTHER STRENGTHENS THE ENCOURAGING RESULTS THAT
14	WERE ACHIEVED TO DATE, AND IT IS ACTUALLY ONE OF
15	THREE PORTFOLIO PROJECTS THAT TARGET HUNTINGTON'S
16	DISEASE, BUT THE APPROACH AND MECHANISM ARE VERY
17	DISTINCT FROM THE OTHER PROJECTS.
18	MR. SHEEHY: THANK YOU, DR. OLSON. AND,
19	DR. MILLS, YOU'RE IN SUPPORT OF THIS?
20	DR. MILLS: AFFIRMATIVE.
21	MR. SHEEHY: SO DO I HAVE A MOTION TO
22	ACCEPT THE RECOMMENDATION?
23	MR. TORRES: SO MOVED.
24	MR. SHEEHY: SECOND?
25	UNIDENTIFIED SPEAKER: (INAUDIBLE).
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1	MR. SHEEHY: ANY BOARD COMMENT? ANY
2	PUBLIC COMMENT?
3	MR. REED: I'D JUST LIKE TO POINT OUT THAT
4	I'M DELIGHTED TO SEE AN EMBRYONIC STEM CELL APPROACH
5	TO HUNTINGTON'S AS THE OTHER TWO WERE ADULT STEM
6	CELL. SO I'M VERY MUCH IN FAVOR.
7	MS. ROBERSON: HELLO. JUDY ROBERSON
8	FROM PATIENT ADVOCATE FOR HUNTINGTON'S DISEASE
9	FROM SACRAMENTO. HD IS TECHNICALLY CLASSIFIED AS A
10	RARE DISEASE, BUT IT IS AS COMMON OR MORE COMMON
11	THAN ALS AND CYSTIC FIBROSIS. AND FOR FAMILIES LIKE
12	MINE, THIS SINGLE DOMINANT GENE GUARANTEES THAT THE
13	PERSON INHERITING THIS GENE WILL ONE DAY DEVELOP
14	HUNTINGTON'S DISEASE AND WILL CERTAINLY DIE FROM IT
15	WITHOUT ONE INTERVENTION AVAILABLE TODAY.
16	AT ONE TIME WE THOUGHT BLUEBERRIES MIGHT
17	HELP. THINK OF THAT, BLUEBERRIES. AND THAT'S BEEN
18	DISCOUNTED.
19	HD HAS DEVASTATED MY FAMILY WITH FOUR
20	LOVED ONES WHO HAVE PASSED AWAY, ONE SICK RIGHT NOW,
21	AND THERE'S 17 LOVED ONES, MY CHILDREN AND
22	GRANDCHILDREN INCLUDED, LIVING AT RISK, YET THEY'RE
23	LIVING POSITIVELY AND WAITING HOPEFULLY. WE LIVE
24	WITH HOPE BECAUSE OF RESEARCHERS LIKE DR. LESLIE
25	THOMPSON AND HER GROUP AND DR. JAN NOLTA AT UC
	101

1	DAVIS. BUT THIS BRIDGE GRANT TODAY IS FOR
2	DR. LESLIE THOMPSON AND HER CONSORTIUM. AND WE'RE
3	HOPING THAT YOU WILL SEE HOW IMPORTANT THIS IS, THIS
4	FUNDING IS, AND WILL APPROVE HER GRANT.
5	SO EVEN TODAY, 21 YEARS AFTER THE GENE FOR
6	HUNTINGTON'S DISEASE WAS FOUND, THERE'S STILL NO
7	TREATMENT FOR HUNTINGTON'S. REGENERATIVE MEDICINE
8	THROUGH CIRM IS OUR BIG HOPE. SO PLEASE SUPPORT
9	DR. LESLIE THOMPSON. THANK YOU.
10	MR. SHEEHY: THANK YOU, JUDY. SO READY TO
11	CALL THE ROLL?
12	MS. BONNEVILLE: STEVE JUELSGAARD. LAUREN
13	MILLER.
14	MS. MILLER: YES.
15	MS. BONNEVILLE: JOE PANETTA.
16	MR. PANETTA: YES.
17	MS. BONNEVILLE: FRANCISCO PRIETO.
18	DR. PRIETO: AYE.
19	MS. BONNEVILLE: ROBERT QUINT.
20	DR. QUINT: YES.
21	MS. BONNEVILLE: AL ROWLETT.
22	MR. ROWLETT: YES.
23	MS. BONNEVILLE: JEFF SHEEHY.
24	MR. SHEEHY: YES.
25	MS. BONNEVILLE: JONATHAN THOMAS.
	100
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1	CHAIRMAN THOMAS: YES.
2	MS. BONNEVILLE: ART TORRES.
3	MR. TORRES: AYE.
4	MS. BONNEVILLE: DIANE WINOKUR.
5	MS. WINOKUR: YES.
6	MR. HARRISON: MOTION CARRIES.
7	CHAIRMAN THOMAS: THANK YOU. MR. SHEEHY,
8	CLAYTON KERSHAW IS NOT ELIGIBLE TO VOTE, BUT I'M
9	CONFIDENT WERE HE TO, HE WOULD BE SUPPORTIVE AS
10	WELL. BEST OF LUCK THIS WEEKEND.
11	OKAY. SO WE NOW PROCEED THERE ARE NO
12	CLOSED SESSION ITEMS. WE PROCEED TO DISCUSSION ITEM
13	14 AND A COMMUNICATIONS UPDATE FROM KEVIN AND ANN.
14	MR. MC CORMACK: CHAIRMAN THOMAS, MEMBERS
15	OF THE BOARD, COLLEAGUES, MEMBERS OF THE PUBLIC, I
16	FIGURED OUT EARLIER TODAY WHY PEOPLE LIKE IT WHEN I
17	COME UP HERE, BECAUSE I'M THE FAT LADY AND I'M ABOUT
18	TO SING. AS SOON AS YOU SEE ME COMING UP, YOU
19	REALIZE, OH, GOOD, WE CAN GO HOME SOON.
20	SO WANTED TO UPDATE YOU ON A NUMBER OF
21	THINGS. OBVIOUSLY THE FIRST ONE IS THE OBVIOUS
22	THING, THE ELEPHANT IN THE ROOM, THAT BOTH CHAIRMAN
23	THOMAS AND DR. MILLS TALKED ABOUT EARLIER, THE NEWS
24	THAT DR. TROUNSON WAS JOINING THE BOARD OF STEM
25	CELLS, INC. AND IT CREATED, FOR WANT OF A BETTER
	103

1	PHRASE, A BIT OF A STINK AND GOT A LOT OF COVERAGE,
2	SOME GOOD, SOME NOT SO GOOD.
3	IT WAS VERY INTERESTING TO LOOK AT KIND OF
4	THE RANGE OF STORIES THAT WERE OUT THERE. SOME OF
5	THE ARTICLES WERE VERY BALANCED, POINTING OUT THAT
6	THIS HAPPENED, THAT WE HAD NO IDEA ABOUT IT, AND
7	THAT REALLY THERE WAS NOTHING THAT WE COULD DO ABOUT
8	IT. SOME OF THEM WERE A BIT MORE POINTED AND USED
9	THEM AS AN OPPORTUNITY TO CRITICIZE US FOR SOME
10	FAIRLY FAMILIAR CHARGES.
11	FROM A MEDIA AND COMMUNICATIONS
12	PERSPECTIVE, IT WAS INTERESTING JUST TO KIND OF SEE
13	THE DIFFERENT RANGE OF STORIES AND THEN KIND OF
14	FIGURE OUT WHERE WHAT LESSONS WE NEEDED TO LEARN
15	FROM THIS. AND SO HOPEFULLY WE'VE LEARNED SOME
16	LESSONS ABOUT HOW TO BE MORE EFFECTIVE AT GETTING
17	OUR MESSAGE OUT AND MOVING ON.
18	AND THERE WAS A LOT OF GOOD COVERAGE
19	ACTUALLY LATELY. IN FACT, SAN FRANCISCO CHRONICLE
20	HAD A FINE ARTICLE YESTERDAY ON THE WORK THAT WE'RE
21	FUNDING IN HIV AND AIDS. THEY INTERVIEWED PEOPLE AT
22	BOTH CAL-IMMUNE AND DR. ZAIA FOR THE WORK WE'RE
23	DOING. AND IT WAS REALLY A GOOD IN-DEPTH PIECE, AND
24	THEY GAVE US A NICE SHOUT-OUT, OF COURSE, FOR OUR
25	SUPPORT FOR ALL THIS.
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1	THE SAN DIEGO UNION TRIBUNE HAD A GOOD
2	PIECE LAST WEEK AS WELL ON THE NEWS THAT VIACYTE HAD
3	SUBMITTED ITS APPLICATION FOR AN IND WITH THE FDA.
4	OBVIOUSLY IN SAN DIEGO THIS IS BIG NEWS AND
5	IMPORTANT NEWS. AND SO IT WAS GOOD TO SEE THAT A
6	LOCAL NEWSPAPER WAS PICKING UP THIS AND REPORTING
7	SOMETHING LIKE THIS. THESE ARE RELATIVELY SMALL
8	STEPS, IN MANY CASES, IN THE APPROVAL PROCESS; BUT
9	FOR TREATMENTS LIKE THIS AND FOR PARTICULARLY PEOPLE
10	WITH TYPE 1 DIABETES, THESE ARE IMPORTANT STEPS.
11	THESE ARE BIG STEPS ALONG THE WAY TO HAVING A
12	THERAPY. AND SO IT WAS GOOD TO SEE THE LOCAL MEDIA
13	PICK UP ON THAT AND REFLECT THAT. AND CERTAINLY
14	WE'LL BE WORKING WITH REPORTERS TO TRY AND GET MORE
15	OF THAT.
16	NATURE HAD A GOOD PIECE, A KIND OF A LOOK
17	BACK ON WHERE WE'VE BEEN AND WHERE WE'RE GOING, AND
18	THAT WAS A REALLY LONG, IN-DEPTH PIECE. THE
19	HUFFINGTON POST HAD A PROFILE OF DR. MILLS. IT WAS
20	A QUESTION AND ANSWER PIECE, SO IT WAS A GOOD
21	OPPORTUNITY FOR HIM TO TALK ABOUT HIS VISION FOR THE
22	AGENCY, THE THING THAT HE WANTS TO DO, AND JUST SOME
23	OF THE REASONS WHY HE TOOK THE JOB.
24	AND THE LAST ONE IS THE WASHINGTON POST,
25	WE ACTUALLY GOT A SURPRISE PICKUP THERE FOR ONE OF

1	THE BLOGS THAT WE WROTE ABOUT THE WORLD CUP AND THE
2	FACT THAT ONE OF THE ARGENTINE STARS WAS INJURED
3	BEFORE THE FINAL AND WAS TAKING A NUMBER OF
4	THERAPIES, INCLUDING A STEM CELL THERAPY, TO TRY AND
5	GET READY FOR THE FINAL AGAINST GERMANY. THE
6	WASHINGTON POST SAW OUR BLOG AND PICKED UP THE PIECE
7	AND THEN DID A PIECE OF THEIR OWN ABOUT IT AND
8	QUOTED US. SO THAT WAS REALLY NICE.
9	AND AS AN UPDATE, THE ARGENTINE STAR
10	DIDN'T MAKE THE WORLD CUP FINAL AND THEY LOST. SO
11	GO GERMANY. THAT WAS THAT. AND YOU'LL HAVE MY
12	RESIGNATION TOMORROW.
13	AT THE LAST BOARD MEETING, I TALKED ABOUT
14	THE MEET THE PRESIDENT EVENTS THAT WE WERE GOING TO
15	HOLD IN SAN FRANCISCO, L.A., AND SAN DIEGO. AND
16	THEY WENT OFF REALLY WELL. I THINK WE GOT BETWEEN
17	25 AND 40 AT SOME OF THE DIFFERENT EVENTS. IT WAS A
18	REALLY INTERESTING MIXTURE OF BOTH GRANTEES AND
19	RESEARCHERS AND PATIENT ADVOCATES. IT WAS A GREAT
20	OPPORTUNITY FOR DR. MILLS TO INTRODUCE HIMSELF TO
21	THEM AND TO GET TO KNOW THEM AND THEM TO GET TO KNOW
22	HIM, I THINK, AND GET A GOOD FEEL FOR WHAT HE'S
23	DOING.
24	THE THIRD ONE IN SAN DIEGO WAS ACTUALLY
25	PART OF A MEETING DOWN AT BIO 2014. AND CHAIRMAN
	100

1	THOMAS SAID EARLIER, BUT I'D LIKE TO COMPLIMENT MY
2	COLLEAGUE DON GIBBONS FOR DOING A MARVELOUS JOB ON
3	HELPING ORGANIZE A FULL-DAY TRACK ON REGENERATIVE
4	MEDICINE. THIS WAS THE FIRST TIME THAT THEY'D HAD
5	SOMETHING LIKE THIS AT BIO, WHICH IS ONE OF THE
6	LARGEST LIFE SCIENCES CONFERENCES IN THE COUNTRY.
7	AND SO TO GET A FULL DAY DEVOTED TO REGENERATIVE
8	MEDICINE WAS A GREAT FEAT. IN PART, OF COURSE, IT
9	WAS DUE TO THE EFFORTS OF OUR LATE AND LAMENTED
10	COLLEAGUE DUANE ROTH, WHO REALLY KIND OF PUSHED US
11	TO BE A PART OF THIS EVENT.
12	BUT THE REGENERATIVE MEDICINE PANELS WERE
13	REALLY WELL RECEIVED. THERE WERE I THINK
14	PROBABLY ALMOST ALL OF THEM WERE ALMOST FULL ALL THE
15	TIME, WHICH FOR A FIRST EVENT LIKE THIS WAS VERY
16	IMPRESSIVE, PARTICULARLY ON THE DAY WHEN THERE WERE
17	A NUMBER OF REALLY BIG WORLD CUP GAMES GOING ON, AND
18	THEY HAD A MASSIVE TV SCREEN SET UP IN THE
19	AUDITORIUM TO WATCH THOSE.
20	WE ALSO USED THE EVENT TO HOLD A NEWS
21	CONFERENCE WITH CAL-IMMUNE, WHO WERE ANNOUNCING THE
22	FACT THAT THEIR FIRST COHORT OF PATIENTS FOR THEIR
23	HIV THERAPIES, STEM CELL GENE MODIFICATION THERAPY,
24	HAD BEEN CLEARED AND THAT THE SAFETY DATA LOOKED
25	GOOD. AND SO THEY WERE GIVEN PERMISSION TO RECRUIT

1	THE SECOND OR TO BEGIN TREATING THE SECOND COHORT OF
2	PATIENTS. AGAIN, IN THE GENERAL SCHEME OF THINGS,
3	THIS IS QUITE A SMALL STEP, BUT FOR A NEW THERAPY
4	LIKE THIS, IT'S REALLY IMPORTANT TO KIND OF
5	CELEBRATE THESE MILESTONES BECAUSE THEY ARE
6	IMPORTANT AND THEY REFLECT THE KIND OF PROGRESS
7	THAT'S BEING MADE. AND HOPEFULLY WE'LL HAVE MANY,
8	MANY MORE OF THESE IN THE COMING MONTHS.
9	AND I ALSO TOOK THE OPPORTUNITY TO GO AND
10	MEET SOME COLLEAGUES AT THE REUBEN H. FLEET SCIENCE
11	CENTER, WHICH IS THE MAIN SCIENCE MUSEUM IN SAN
12	DIEGO. WE'RE HOLDING SIMILAR MEETINGS WITH THE
13	FOLKS AT THE CALIFORNIA SCIENCE CENTER IN L.A. AND
14	THE EXPLORATORIUM IN SAN FRANCISCO AND THE TECH
15	MUSEUM IN SAN JOSE.
16	THESE ARE GREAT OPPORTUNITIES FOR US TO
17	PARTNER WITH THESE. THEY HAVE A GREAT AUDIENCE, A
18	REAL MIX. IN SAN FRANCISCO'S CASE, TOURISTS AND
19	LOCALS; BUT IN MOST OF THE OTHER CASES, A LOT OF
20	KIND OF SCHOOL KIDS, FAMILIES. SO IT'S A GREAT
21	OPPORTUNITY FOR US TO USE THESE AS A WAY TO REACH
22	OUT AND EDUCATE PEOPLE ABOUT THE PROGRESS THAT'S
23	BEING MADE IN STEM CELL RESEARCH, BUT ALSO THE
24	INFLUENCE AND THE IMPORTANCE THAT THE PEOPLE OF
25	CALIFORNIA ARE HAVING IN SUPPORTING THIS. SO I
	100

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1	THINK THOSE ARE THINGS THAT WE'RE CERTAINLY GOING TO
2	BE EXPLORING AND DOING A LOT MORE OF IN THE FUTURE.
3	AND NOW I'D LIKE TO INTRODUCE YOU TO THE
4	NEWEST MEMBER OF OUR TEAM, DR. ANN HOLDEN, WHO
5	JOINED US NOT SO LONG AGO, BUT HAS ALREADY HAD QUITE
6	A BIG IMPACT. AND SHE'S GOING TO TALK ABOUT SOME OF
7	THE THINGS THAT SHE'S BEEN DOING.
8	DR. HOLDEN: THANK YOU. SO I'VE BEEN
9	ASKED TO TALK BRIEFLY ABOUT SOME EXCITING CHANGES
10	WE'VE MADE TO THE OFFICIAL CIRM BLOG, ONE OF OUR KEY
11	TOOLS FOR COMMUNICATING STEM CELL SCIENCE TO THE
12	PUBLIC. SO ON THE SCREEN RIGHT NOW IS, AS YOU MIGHT
13	REMEMBER, THE OLD BLOG WITH A GREAT PHOTO OF MR.
14	SHEEHY RIGHT THERE FROM AN OLD POST FROM LAST YEAR.
15	SO, BRIEFLY, THE BLOG'S ORIGINAL PURPOSE
16	WAS TO BE THE ENGINE THAT DRIVES ALL OF OUR ONLINE
17	ACTIVITIES, PROVIDE A WAY FOR CIRM TO CONTRIBUTE TO
18	THE DAILY STEM CELL CONVERSATION IN THE NEWS. IT
19	ALSO SERVES TO DRIVE FACEBOOK CONTENT AND TWITTER
20	CONTENT. ALONE THE BLOG IS ONE OF THE MOST
21	SIGNIFICANT DRIVERS OF TRAFFIC TO OUR CIRM WEBSITE.
22	AND GIVEN THAT THE BLOG UNDERLIES BOTH TWITTER AND
23	FACEBOOK, IT ACCOUNTS FOR A SIGNIFICANT SOURCE OF
24	WEBSITE TRAFFIC WHICH GOOGLE USES AS AN INDICATOR TO
25	DETERMINE THE SITE'S RELEVANCE.

1	SO ULTIMATELY THE GOAL OF THE BLOG WAS
2	THEN TO HELP CIRM BECOME AND BE ONE OF THE TOP
3	RESOURCES FOR OUR AUDIENCES ABOUT STEM CELL BIOLOGY
4	AND REGENERATIVE MEDICINE. SO FOUR YEARS AND MORE
5	THAN 1100 BLOG POSTS LATER, WE DECIDED THAT IT WAS
6	TIME FOR A LITTLE FACE-LIFT. SO IT'S INCREASINGLY
7	IMPORTANT TO USE NEW, INNOVATIVE WAYS TO SHARE OUR
8	CONTENT, INCLUDING A HEAVY RELEVANCE ON MULTIMEDIA,
9	AND THE PREVIOUS PLATFORM THAT WE HAD, I FELT, WAS
10	VERY RESTRICTIVE AND NOT ABLE TO SORT OF REALLY DO
11	WHAT I WANTED TO DO WITH IT.
12	IT'S ALSO IMPORTANT, I FELT, TO BRING THE
13	BLOG INTO THE FOLD OF THE LARGER CIRM WEBSITE. SO
14	WE'VE CREATED A NEW URL, AS YOU CAN SEE BELOW,
15	BLOG.CIRM.CA.GOV. ALSO, OUR OLD BLOG NAME WAS
16	CALLED "CIRM STEM CELL RESEARCH UPDATES," WHICH,
17	WHILE FINE FOR SCO PURPOSES, WAS NOT MEMORABLE.
18	ALSO, WE COULDN'T REALLY SHARE IT EASILY. FOR
19	EXAMPLE, STANFORD HAS THE "SCOPE," SANFORD-BURNHAM
20	HAS THE "BEAKER," AND NOW WE HAVE THE "STEM CELLAR."
21	SO BRIEFLY I'LL JUST GO TO THE BLOG ITSELF
22	AND YOU CAN SEE. IN A FUNNY STORY, WE SUBMITTED
23	THERE ARE PROBABLY ABOUT 20 OR 30 OPTIONS, AND THE
24	"STEM CELLAR" WAS ACTUALLY MY FATHER'S IDEA. SO HE
25	WON.
	110

1	MR. MC CORMACK: THE VOTING WAS DONE
2	ANONYMOUSLY, SO WE HAD NO IDEA.
3	DR. MILLS: I ASSURE YOU, SENATOR, WE'RE
4	LOOKING INTO IT. WE'LL CONDUCT A THOROUGH REVIEW
5	AND WE'LL REPORT BACK AT THE NEXT MEETING.
6	CHAIRMAN THOMAS: MR. HARRISON, WHAT ARE
7	RULES ON NEPOTISM ANYWAY?
8	DR. HOLDEN: SO WHAT YOU SEE HERE IS OUR
9	NEW BLOG, THE "STEM CELLAR." AND YOU CAN FIND IT
10	AGAIN AT BLOG.CIRM.CA.GOV. AS YOU WILL SEE, WE'VE
11	CREATED A NEW HEADER IMAGE THAT HIGHLIGHTS SOME OF
12	OUR PATIENT ADVOCATES. AND I BELIEVE THIS SHOULD BE
13	A FLUID, REGULARLY ROTATING HEADER WITH BOTH
14	SCIENTIFIC IMAGES AND ADVOCATES AND OTHER SORT OF
15	VISUAL WAYS TO REPRESENT WHO WE ARE AND WHAT OUR
16	GOALS ARE.
17	YOU CAN ALSO SEE THAT THERE ARE IT'S
18	NOT SHOWING UP, BUT ACTUALLY ARE DIFFERENT
19	CATEGORIES. ALL OF OUR ARTICLES FALL INTO DIFFERENT
20	CATEGORIES, INCLUDING CIRM NEWS, INDUSTRY NEWS,
21	RESEARCH NEWS, ALSO EVENTS INCLUDING THE ISSCR
22	MEETINGS, OTHER EVENTS INCLUDING THESE ICOC BOARD
23	MEETINGS. WE ALSO HAVE ANOTHER SEPARATE CATEGORY
24	FOR OUR EVER POPULAR STORIES, STEM CELL STORIES,
25	THAT CAUGHT OUR EYE, OUR WEEKLY ROUNDUP SERIES.
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IN THE COMING WEEKS AND MONTHS, WE'LL ALSO
BE ADDING NEW SECTIONS INCLUDING LONG-FORM FEATURE
PIECES AND ENHANCED MULTIMEDIA. AND IN CASE YOU
WONDERED WHERE ALL THE OLD ARTICLES WENT, ALL 1100
PLUS ARTICLES WERE TRANSPORTED OVER AND FORMATTED,
SO ALL OF THE POSTS, IN CASE YOU WANT TO GO BACK
SEVERAL YEARS, ARE THERE IF YOU'D LIKE TO.
AND JUST TO FINISH UP, YOU CAN, AGAIN,
FIND ALL OF OUR STORIES VIA OUR FACEBOOK AND TWITTER
PAGES. SO PLEASE DO CHECK THOSE OUT. WE UPDATE THE
BLOG AT LEAST ONCE A DAY WITH NEW AND FRESH CONTENT.
AND FINALLY, I'D LIKE TO THANK EVERYONE
WHO HELPED ME IN THIS VERY LARGE PROJECT, LARGER
THAN I ORIGINALLY INTENDED, INCLUDING THE
COMMUNICATIONS TEAM, I.T., ESPECIALLY NICHOLAS
ROBERTS WHO HELPED WITH THE PORT AND THE TRANSPORT
AND THE FORMATTING OF ALL 1100 ARTICLES, AND ALSO
ALL THE CIRM STAFF WHO HELPED WITH TROUBLESHOOTING
AT THE BEGINNING.
SO I THANK YOU FOR YOUR TIME, AND ANY
QUESTIONS I'M HAPPY TO ANSWER NOW OR AFTERWARDS.
THANK YOU.
DR. PRIETO: I HAVE ONE QUESTION. I'M NOT
SURE IT'S A QUESTION, OBSERVATION. AFTER I SAW THE
NEW TITLE, I ENTERED INTO A GOOGLE SEARCH AND IT
112

1	DOES NOT COME UP ON THE FRONT PAGE. IF YOU ADD
2	CIRM, IF YOU TYPE IN THE "STEM CELLAR" CIRM, IT
3	COMES UP, BUT THE "STEM CELLAR" GETS YOU A LOT OF
4	STUFF ABOUT ROOT CELLARS. I DON'T KNOW WHAT YOU CAN
5	DO ABOUT THAT.
6	DR. HOLDEN: RIGHT. SO I'M WORKING WITH
7	NICHOLAS. ACTUALLY HE ACTUALLY E-MAILED ME JUST
8	BEFORE I CAME UP HERE SAYING THAT IT IS GETTING
9	HIGHER ON THE SCO. SO BASICALLY WE'RE GOING TO HAVE
10	TO CONTINUE TO WORK WITH SCO PRACTICES TO MOVE IT
11	HIGHER UP THERE, BUT WE'RE VERY OPTIMISTIC THAT IT
12	WILL BE UP ON THE TOP. IT'S ON THE TOP NOW. GREAT.
13	THANKS.
14	CHAIRMAN THOMAS: WE ALWAYS ATTEMPT TO
	DECROND AC OUTCALL AC DOCCEDIE TO CUCCECTION AND
15	RESPOND AS QUICKLY AS POSSIBLE TO SUGGESTION AND
	CRITICISM. SO, ANN, THANK YOU. I NOTED IN A NOTE
16	
16 17	CRITICISM. SO, ANN, THANK YOU. I NOTED IN A NOTE
16 17 18	CRITICISM. SO, ANN, THANK YOU. I NOTED IN A NOTE BACK TO HER AFTER LOOKING AT THIS, WHEN YOU GET A
16 17 18 19	CRITICISM. SO, ANN, THANK YOU. I NOTED IN A NOTE BACK TO HER AFTER LOOKING AT THIS, WHEN YOU GET A CHANCE TO LOOK AT IT, IT IS A GREAT AGGREGATION OF
16 17 18 19 20	CRITICISM. SO, ANN, THANK YOU. I NOTED IN A NOTE BACK TO HER AFTER LOOKING AT THIS, WHEN YOU GET A CHANCE TO LOOK AT IT, IT IS A GREAT AGGREGATION OF ALL OF THE SUBSTANCE THAT WE LIKE TO HAVE IN ONE
16 17 18 19 20 21	CRITICISM. SO, ANN, THANK YOU. I NOTED IN A NOTE BACK TO HER AFTER LOOKING AT THIS, WHEN YOU GET A CHANCE TO LOOK AT IT, IT IS A GREAT AGGREGATION OF ALL OF THE SUBSTANCE THAT WE LIKE TO HAVE IN ONE SITE AND VERY EASY TO FOLLOW, VERY EASY TO READ. I
16 17 18 19 20 21	CRITICISM. SO, ANN, THANK YOU. I NOTED IN A NOTE BACK TO HER AFTER LOOKING AT THIS, WHEN YOU GET A CHANCE TO LOOK AT IT, IT IS A GREAT AGGREGATION OF ALL OF THE SUBSTANCE THAT WE LIKE TO HAVE IN ONE SITE AND VERY EASY TO FOLLOW, VERY EASY TO READ. I THINK IT IS A REAL UPGRADE. SO THANK YOU FOR ALL
15 16 17 18 19 20 21 22 23 24	CRITICISM. SO, ANN, THANK YOU. I NOTED IN A NOTE BACK TO HER AFTER LOOKING AT THIS, WHEN YOU GET A CHANCE TO LOOK AT IT, IT IS A GREAT AGGREGATION OF ALL OF THE SUBSTANCE THAT WE LIKE TO HAVE IN ONE SITE AND VERY EASY TO FOLLOW, VERY EASY TO READ. I THINK IT IS A REAL UPGRADE. SO THANK YOU FOR ALL YOUR HARD WORK. I KNOW THAT TOOK A LOT.
16 17 18 19 20 21 22	CRITICISM. SO, ANN, THANK YOU. I NOTED IN A NOTE BACK TO HER AFTER LOOKING AT THIS, WHEN YOU GET A CHANCE TO LOOK AT IT, IT IS A GREAT AGGREGATION OF ALL OF THE SUBSTANCE THAT WE LIKE TO HAVE IN ONE SITE AND VERY EASY TO FOLLOW, VERY EASY TO READ. I THINK IT IS A REAL UPGRADE. SO THANK YOU FOR ALL YOUR HARD WORK. I KNOW THAT TOOK A LOT. KEVIN, ARE YOU FINISHED WITH YOUR

1	CHAIRMAN THOMAS: OKAY. WELL, I THINK
2	WITHOUT FURTHER ADO THEN, WE'VE REACHED THE END OF
3	THE AGENDA IN WORLD RECORD TIME.
4	MS. BONNEVILLE: PUBLIC COMMENT.
5	CHAIRMAN THOMAS: NOW WE HAVE PUBLIC
6	COMMENT. HEARING NO PUBLIC COMMENT
7	DR. LORING: I APPRECIATE THAT. THIS IS
8	JEANNE LORING, AND I USUALLY COMMENT AT THESE
9	MEETINGS. SO APPARENTLY I'VE BEEN NOMINATED AS THE
10	CLOSING PUBLIC COMMENT. I THINK THAT THE MOST
11	IMPORTANT THING THAT CIRM CAN DO RIGHT NOW IS TO LET
12	PEOPLE KNOW ABOUT THE GOOD WORK THAT THEY'VE BEEN
13	DOING. TO EDUCATE THE PUBLIC IS OUR HIGHEST GOAL,
14	AND I VERY MUCH APPRECIATE THE WORK OF THESE GUYS,
15	WHATEVER YOUR NAME IS. SORRY. NO. I TALK TO KEVIN
16	QUITE A BIT. THEY ARE REALLY GRABBING PEOPLE'S
17	ATTENTION, AND I THINK THAT'S THE MOST IMPORTANT
18	THING WE CAN BE DOING RIGHT NOW BECAUSE THE SCIENCE
19	IS REALLY GOOD. WE JUST HAVE TO LET PEOPLE KNOW
20	ABOUT IT. THANKS.
21	CHAIRMAN THOMAS: THANK YOU, DR. LORING.
22	ANY OTHER PUBLIC COMMENT? HEARING NONE, WE STAND
23	ADJOURNED AT 12:10 P.M. AND WE WILL SEE YOU IN
24	SEPTEMBER. THANK YOU.
25	(THE MEETING WAS THEN CONCLUDED AT

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12:10 P.M.)
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REPORTER'S CERTIFICATE

I, BETH C. DRAIN, A CERTIFIED SHORTHAND REPORTER IN AND FOR THE STATE OF CALIFORNIA, HEREBY CERTIFY THAT THE FOREGOING TRANSCRIPT OF THE PROCEEDINGS BEFORE THE INDEPENDENT CITIZEN'S OVERSIGHT COMMITTEE OF THE CALIFORNIA INSTITUTE FOR REGENERATIVE MEDICINE IN THE MATTER OF ITS REGULAR MEETING HELD AT THE LOCATION INDICATED BELOW

WESTIN SAN FRANCISCO AIRPORT

1 OLD BAYSHORE HIGHWAY

MILLBRAE, CALIFORNIA

ON

JULY 24, 2014

WAS HELD AS HEREIN APPEARS AND THAT THIS IS THE ORIGINAL TRANSCRIPT THEREOF AND THAT THE STATEMENTS THAT APPEAR IN THIS TRANSCRIPT WERE TRANSCRIBED BY ME. I ALSO CERTIFY THAT THIS TRANSCRIPT IS A TRUE AND ACCURATE RECORD OF THE PROCEEDING.

BETH C. DRAIN, CSR 7152 BARRISTERS' REPORTING SERVICE 160 S. OLD SPRINGS ROAD SUITE 270 ANAHEIM, CALIFORNIA (714) 444-4100