PROTOCOL SIGNATURE PAGE

Protocol:	**Version/Date:**
HIVTR-CCR5 DAIDS-ES 20730	Version 4.0/February 28, 2019

Title:

Impact of CCR5 Blockade in HIV+ Kidney Transplant Recipients

I will conduct the study in accordance with the provisions of this protocol and all applicable protocol-related documents. I agree to conduct this study in compliance with United States (US) Health and Human Service regulations (45 CFR 46); applicable U.S. Food and Drug Administration regulations; standards of the International Conference on Harmonization Guideline for Good Clinical Practice (E6); Institutional Review Board/Ethics Committee determinations; all applicable in-country, state, and local laws and regulations; and other applicable requirements (e.g., US National Institutes of Health, Division of AIDS) and institutional policies.

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Site Principal Investigator Name (Print)

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Site Principal Investigator (Signature) **Date**