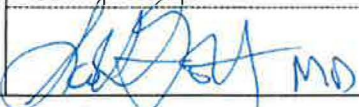


<b>CERTIFICATION OF ETHICS AGREEMENT COMPLIANCE</b> Senate Confirmed Presidential Appointee		
<b>1.</b> <b>Appointee's Information</b>	a. Appointee's Name:	to be completed by OGE <b>Scott Gottlieb, M.D.</b>
	b. Position Title:	to be completed by OGE <b>Commissioner, Food and Drug Administration</b>
	c. Agency:	to be completed by OGE <b>U.S. Department of Health and Human Services</b>
	d. Date Ethics Agreement Signed:	to be completed by OGE <b>March 28, 2017</b>
	e. Date Confirmed:	to be completed by OGE <b>May 9, 2017</b>
	f. Due Date for Certification of Ethics Agreement Compliance:	to be completed by OGE <b>August 14, 2017</b>
<b>2.</b> <b>Resignations</b>	<i>I completed all of the resignations indicated in my ethics agreement before I assumed the duties of my current government position.</i>	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
<b>3.</b> <b>Divestitures</b>	a. <i>I have completed all of the divestitures indicated in my ethics agreement. I also understand that I may not repurchase these assets during my appointment without OGE's prior approval.</i>	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
	b. <i>I have filed a period transaction report, or periodic transaction reports, (OGE Form 278-T) to disclose the completion of these agreed upon divestitures.</i>	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> N/A Filing Date(s) of OGE Form 278-T Report(s):
<b>4.</b> <b>Managed Accounts</b>	<i>If I have a managed account or use the services of an investment professional, I have notified the manager or professional of the limitations indicated in my ethics agreement. In addition, I am continuing to monitor purchases.</i>	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> N/A
<b>5.</b> <b>Interim Recusals</b>	<i>I complied with my interim recusal obligations pending the divestitures required by my ethics agreement.</i>	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A

<p>6.</p> <p><b>Recusals</b></p> <p><i>(Note: These factual statements describe the appointee's current status. They are not intended to modify ethics agreement commitments or create new recusal obligations.)</i></p>	<p>a. I am recusing from particular matters in which I know I have a <u>personal</u> or <u>imputed</u> financial interest directly and predictably affected by the matter, unless I have received a waiver or qualify for a regulatory exemption.</p>	<p><input checked="" type="radio"/> Yes      <input type="radio"/> No</p>
	<p>b. I am recusing from particular matters in which any former employer or client I served in the past year is a party or represents a party, unless I have been authorized under 5 C.F.R. § 2635.502(d).</p>	<p><input checked="" type="radio"/> Yes      <input type="radio"/> No      <input type="radio"/> N/A</p>
	<p>c. I am recusing from particular matters in which any former employer or client I served in the two years prior to my appointment is a party or represents a party, unless I have received a waiver under Exec. Order 13770.</p>	<p><input checked="" type="radio"/> Yes      <input type="radio"/> No      <input type="radio"/> N/A</p>
<p>7.</p> <p><b>Waivers and Authorizations</b></p>	<p>a. I received a waiver pursuant to 18 U.S.C. § 208.</p> <p>If yes, indicate the date of the waiver and indicate the financial interest covered by the waiver.</p>	<p><input type="radio"/> Yes      <input checked="" type="radio"/> No</p> <p>Date:</p> <p>Financial interest:</p>
	<p>b. I received a waiver pursuant to Executive Order 13770.</p> <p>If yes, indicate the date of the waiver and the subject of the waiver (i.e., applicable paragraph of the ethics pledge, parties, particular matters, specific issue areas, as applicable).</p>	<p><input type="radio"/> Yes      <input checked="" type="radio"/> No</p> <p>Date:</p> <p>Subject:</p>
	<p>c. I received an authorization pursuant to 5 C.F.R. § 2635.502(d).</p> <p>If yes, indicate date of authorization and identify the covered person(s) as to whom you have been authorized (e.g., former employer, former client, spouse's employer, spouse's current client, etc.).</p>	<p><input type="radio"/> Yes      <input checked="" type="radio"/> No</p> <p>Date:</p> <p>Covered person(s):</p>
	<p>d. I received a waiver pursuant to 5 C.F.R. § 2635.503(c).</p> <p>If yes, indicate the date of the waiver and identify the former employer or payer.</p>	<p><input type="radio"/> Yes      <input checked="" type="radio"/> No</p> <p>Date:</p> <p>Former employer or payer:</p>

Scott Gottlieb, M.D.

8. Payments, Accelerations, or Divestitures Required to be Completed Prior to Entering Government Service	Mark this box if not applicable:  <input type="checkbox"/>	a. If I committed that I would forfeit a financial interest or payment, unless it was received or accelerated prior to my assumption of the duties of the government position:	<input checked="" type="radio"/> I received it (or it was accelerated) <u>prior</u> to my assumption of the duties of the position. <input type="radio"/> I received it (or it was accelerated) <u>after</u> my assumption of the duties of the position. <input type="radio"/> I forfeited it.
		b. Financial interest or payment at issue:	MedAvante Compensation
9. Requirements for Regular Appointees	I have completed my initial ethics briefing, pursuant to 5 C.F.R. § 2638.305.  If you are a Special Government Employee (SGE) or career Foreign Service Officer (FSO), select N/A.		<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
	I have signed the ethics pledge pursuant to Executive Order 13770.  If you are a SGE or career FSO or previously signed the pledge, select N/A.		<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
10. Additional Ethics Agreement Requirements	to be completed by OGE	to be completed by appointee	I am complying with these requirements as described in the adjacent box.  <input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> N/A
11. Comments of Appointee			
Any intentionally false or misleading statement or response provided in this certification is a violation of law punishable by a fine or imprisonment, or both, under 18 U.S.C. § 1001.			
I certify that the information I have provided is complete and accurate.	Appointee's Signature:		Date:
			8/3/17