

STATEMENT OF COMPLIANCE

I acknowledge that I have been informed that Duke Health has implemented a compliance program for a number of purposes, including, but not limited to, ensuring that the provision of, and billing for, care at Duke Health is in compliance with applicable federal and state laws and Duke Health operations are conducted in accordance with applicable laws and regulations. I also acknowledge that I have reviewed the Duke Health Code of Conduct (<https://finance.duke.edu/procurement/vendors/cofc/index.php>) and that I will adhere to and support the policies set forth therein.

I further state that:

(Company Name)

1. Has not been convicted of a criminal offense related to healthcare,
2. Is not currently under sanction, suspension, debarment or exclusion, or under investigation (civil or criminal) by a federal or state enforcement, regulatory, administrative, or licensing agency or otherwise ineligible for federal or state program participation.
3. Is not currently listed on the U.S. Department of Health and Human Services, Office of Inspector General List of Excluded Individuals and Entities or General Service Administration System for Award Management, US Treasury Non-SDN OFAC Consolidated Sanction List, US Treasury SDN & Blocked Persons, FDS List for Clinical Investigators or NC Iran Divestment Lists.

Contractor will notify Duke promptly of any allegation of unethical behavior, wrongdoing, or violation of Duke Health Code of Conduct or federal or state anti-corruption or health laws or regulations.

(Name)

(Title)

(Date)

(Signature)

(Phone #)

(Address)

Contractor is invited to attend educational sessions of Duke Health related to its Compliance Program. The failure of Contractor to conduct its activities in accordance with the Code of Conduct and Compliance Program shall constitute a material breach of this Purchase Order/Agreement and Duke Health shall have the absolute right to terminate this Purchase Order/Agreement immediately. Contractor agrees to verify that its employees and subcontractors meet all the requirements outlined above prior to their performing services under this Purchase Order/Agreement.

Please return signed copy to:

Duke Procurement and Supply Chain Management

Fax# 919-684-4344