



Food and Drug Administration Advisory Committee Member
Acknowledgment of Financial Interests

Name of Advisory Committee Member: **Philip C. Hoffman, MD (Chairperson)**

Committee: **Oncologic Drugs Advisory Committee (ODAC)**

Meeting Date: **February 9, 2021**

I acknowledge that contingent upon public disclosure of the following financial interest related to the agenda item: *Pembrolizumab for the treatment of patients with high-risk, early-stage triple-negative breast cancer, in combination with chemotherapy as neoadjuvant treatment, then as a single agent as adjuvant treatment after surgery*, I may be considered for participation in the advisory committee meeting described above.

<u>Type of Interest</u>	<u>Nature</u>	<u>Magnitude</u>
I. Personal/Immediate Family		
None		
II. Other Imputed Interests		
Contracts/grants	Unrelated employer's research on the product at issue, sponsored by Merck & Co.	\$0 - 50,000 per year

I hereby request that FDA make this information publicly available on my behalf if the agency grants a waiver allowing me to participate in the meeting described above. I understand that without public disclosure of these interests, I will not participate in the advisory committee meeting described above.

_____/s/_____
Signature

_____/1/12/2021_____
Date