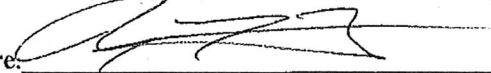


Enclosure 3

Committee on Science, Space, and Technology  
U.S. House of Representatives  
Witness Disclosure Requirement - "Truth in Testimony"  
Required by House Rule XI, Clause 2(g)(5)

1. Your Name: Matthew J. Major		
2. Are you testifying on behalf of the Federal, or a State or local government entity?	Yes	No X
3. Are you testifying on behalf of an entity that is not a government entity?	Yes	No X
4. Other than yourself, please list which entity or entities you are representing: Jesse Brown VA Medical Center , Chicago IL, and Northwestern University, Chicago IL.		
5. Please list any Federal grants, cooperative agreements, or contracts (including subgrants or subcontracts) that you or the entity you represent have received on or after December 31, 2015: U.S. Department of Defense Congressionally Directed Medical Research Programs Peer Reviewed Orthopaedic Research Program and Orthotics and Prosthetics Outcomes Research Program; U.S. Department of Veterans Affairs Career Development Award and Merit Review Award; National Science Foundation.		
6. Please list any foreign government payments that you or the entity you represent have received on or after December 31, 2015: The Foundation for Polish Science (Grant Review Panel).		
7. If your answer to the question in item 3 in this form is "yes," please describe your position or representational capacity with the entity(ies) you are representing:		
8. If your answer to the question in item 3 is "yes," do any of the entities disclosed in item 4 have parent organizations, subsidiaries, or partnerships that you are not representing in your testimony?	Yes	No
9. If the answer to the question in item 3 is "yes," please list any Federal grants, cooperative agreements, or contracts (including subgrants or subcontracts) that were received by the entities listed under the question in item 4 on or after December 31, 2015, that exceed 10 percent of the revenue of the entities in the year received, including the source and amount of each grant or contract to be listed:		

I certify that the above information is true and correct.

Signature: 

Date: 3/16/2018