## WAIVER

## SUPREME COURT OF THE UNITED STATES

Supreme Court Case No. 17-1477 United States, ex rel. Nancy Chase Chapters Health System, Inc., et al.	
I DO NOT INTEND TO FILE A RESPONSE to the perby the Court.	cition for a writ of certiorari unless one is requested
Please check the appropriate boxes:	
☐ Please enter my appearance as Counsel of Recor	rd for all respondents.
■ There are multiple respondents, and I do n appearance as Counsel of Record for the following	ot represent all respondents. Please enter my ng respondent(s):
Chapters Health System, Inc., Chapters Health, Inc., LifePath Hospice, Inc., and Good Shepherd Ho	ospice, Inc. I also am authorized to represent that JSA Healthcare Corporation, Dr. Ronald Schonwetter,
Sunrise Senior Living Services, Inc., Superior Residences, Inc., Mobile Physician Services, P.A., Dr. Richard M. V	Yacksman, Dr. Sayyed Hussain, and Diana Yates do not intend to file a response unless one is requested by the Court.
<ul> <li>I am a member of the Bar of the Supreme Court of I am not presently a member of the Bar of this Couwill be filed by a Bar member.</li> <li>Signature</li></ul>	
(Type or print) Name Joseph H. Lang, Jr.	
■ Mr.	rs.  Miss
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A COPY OF THIS FORM MUST BE SENT TO PETITIONER'S COUNSEL OR TO PETITIONER IF  $PRO\ SE$ . PLEASE INDICATE BELOW THE NAME(S) OF THE RECIPIENT(S) OF A COPY OF THIS FORM. NO ADDITIONAL CERTIFICATE OF SERVICE IS REQUIRED.

CC: Tillman J. Finley, Marino Finley LLP, tfinley@marinofinley.com