



ACADEMI Annual Vendor Representations and Certifications

PUF.019 (Rev.13) This document is UNCONTROLLED in printed form Printed: 9/10/2013

Vendor Name: _____ Date: _____

Current Vendor: New Vendor: ACADEMI Vendor Number (if known): _____

INSTRUCTIONS:

1. Submit the completed forms along with this page. It is recommended that the form be filled out in MS Word®, printed, signed and submitted per the instructions below.
2. All information must be printed legibly.
3. After completing the required forms submit the completed forms as follows:

Mail To: Attn: Procurement Department
 ACADEMI LLC
 PO Box 1029
 Moyock, NC 27958

Fax To: Attn: Procurement Department
 (252) 435-1918

Email To: Scan and Return as directed in the email which accompanied form/file.

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SUBCONTRACTOR SELF-CERTIFICATION – (SBA Required Business Size Certification)

DEFINITIONS

- A. "Buyer" means ACADEMI LLC, its parent company and its affiliates and subsidiaries.
- B. "Contract" means a mutually binding legal relationship obligating a Seller to furnish supplies or services (including construction) and the Buyer to pay for them. It includes all types of written commitments that obligate ACADEMI LLC to an expenditure of funds.
- C. "DFAR" or "DFARS" means the current Department of Defense FAR Supplement in its entirety.
- D. "FAR" means the current Federal Acquisition Regulation in its entirety.
- E. "Order" includes but is not limited to any authorized legal Purchase Order, Change-order, Contract, Subcontract, Addenda and any related attachments thereto, issued by ACADEMI LLC. ("ACADEMI"), to the Seller for the purchase of Product(s).
- F. "Prime Contract" means a contract or contractual action entered into by the United States for the purpose of obtaining supplies, materials, equipment, or services of any kind.
- G. "Product" includes, but is not limited to, all articles, supplies, materials, equipment, labor, supervision, tools, demolition, facilities, services, packaging, containers, documentation, and literature necessary for and incidental to the complete provision of any item and/or the complete performance of any work, specified in an Order.
- H. "Seller" means the party identified on the face of an Order with whom ACADEMI LLC is contracting for Product(s) and includes but is not limited to vendors and subcontractors and their subsidiaries, affiliates, subcontractors, agents, representatives, employees, officers and/or directors.
- I. "Subcontract" means any contract entered into by a subcontractor to furnish supplies and/or services for the performance of a prime contract, or a subcontract under a prime contract at any tier. It includes but is not limited to purchase orders and changes and modifications to purchase orders.
- J. "Subcontractor" means any supplier, distributor, vendor, individual or firm that furnishes supplies or services to or for a prime contractor or another subcontractor.
- K. "Vendor" means any supplier, distributor, subcontractor, individual or firm that furnishes supplies or services.
- L. "Work" means all Product(s) necessary for and incidental to complete fulfillment of an Order as specified.
- M. "ACADEMI" means ACADEMI LLC, its parent company, affiliates and subsidiaries, including but not limited to: ACADEMI Training Center, Inc., XPG LLC and ACADEMI ProShop LLC.
- N. "ACADEMI Procurement Representative" means an individual designated and authorized by ACADEMI LLC.'s recognized procurement organization to administer and/or execute any Order.

PROCUREMENT REVIEW **ACADEMI INTERNAL USE ONLY!**

Vendor Number Assigned?	YES <input type="checkbox"/> , NO <input type="checkbox"/>	Vendor Number: _____
Name (Signature): _____	Signature	Date: _____
Print Name: _____		Title: _____

Vendor: _____

SECTION A – CONTACT INFORMATION

Primary Contact _____	_____	_____	_____	_____
	<small>Last Name</small>	<small>First Name</small>	<small>MI</small>	<small>Title</small>
Address: _____	_____	_____	_____	_____
	<small>Street</small>	<small>City</small>	<small>State</small>	<small>Zip</small>
Country: _____	Phone: _____	Fax: _____		
Nationality: _____	Mobile Phone: _____			
Email: _____				

SECTION B – Business Information – IMPORTANT!

System for Award Management (SAM) is the primary registrant database for the U.S. Federal Government. All vendors performing on U.S. Government Contracts must have SAM registration. Register Online Free at: <https://www.sam.gov/portal/public/SAM>

According to FAR 4.11, prospective vendors must be registered in SAM prior to the award of a contract; basic agreement, basic ordering agreement, or blanket purchase agreement. According to FAR 52.204-7, to register in SAM, a firm must have a Data Universal Numbering System (DUNS) number. The DUNS number is assigned by Dun & Bradstreet, Inc. (D&B) to identify unique business entities and may be obtained **FREE** at: <https://eupdate.dnb.com/requestoptions.asp>

Business Name: _____	DUNS #: _____			
	<small>Name</small>			
CAGE Code: _____	TIN or EIN#: _____			
Address: _____	_____	_____	_____	_____
	<small>Street</small>	<small>City</small>	<small>State</small>	<small>Zip</small>
Phone: _____	FAX _____			
Security Status:				
Facility Clearance:	None <input type="checkbox"/>	Secret <input type="checkbox"/>	Top Secret <input type="checkbox"/>	
Classified Storage:	None <input type="checkbox"/>	Secret <input type="checkbox"/>	Top Secret <input type="checkbox"/>	

SECTION C – Description Of Products and Services Offered

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SECTION D – Certification Regarding Financial Responsibility – (Provide Financial References Below)

Vendor is: Publicly Held Firm <input type="checkbox"/> (Attach most recent financial statement)	Privately Held Firm <input type="checkbox"/>
(1) Banking Reference:	
Bank: _____	Phone: _____
Contact: _____	Title: _____
(3) Credit References:	
Firm: _____	Phone: _____
Contact: _____	Title: _____
Firm: _____	Phone: _____
Contact: _____	Title: _____
Firm: _____	Phone: _____
Contact: _____	Title: _____

Vendor: _____

SECTION E - Certification Regarding Debarment, Suspension, Proposed Debarment And Other Responsibility Matters (Dec 2001)

REQUIRED PER FAR 52.209-5

- (a) (1) The Vendor certifies, to the best of its knowledge and belief that:
 - (1) The Vendor and/or any of its Principals:
 - (A) ARE , ARE NOT , presently debarred, suspended, proposed for debarment, or declared ineligible for the award of contracts by any Federal Agency.
 - (B) HAVE , HAVE NOT , within a three year period preceding this offer, been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, state or local) contract or subcontract; violation of Federal or state antitrust statutes relating to the submission of offers; or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, tax evasion or receiving stolen property; and
 - (C) ARE , ARE NOT , presently indicted for, or otherwise criminally or civilly charged by a governmental entity with, commission of any of the offenses enumerated in paragraph (a)(1)(i)(B) of this provision.
 - (ii) The Vendor HAS , HAS NOT , within a three year period preceding this offer, had one or more contracts terminated for default by any Federal agency. "Principals," for the purpose of this certification means officers; directors; owners; partners; and, persons having primary management or supervisory responsibilities within a business entity (e.g., general manager; plant manager; head of a subsidiary, division or business segment, and similar positions)

SEGREGATED FACILITIES – DOES NOT APPLY OUTSIDE THE U.S. PER FAR 22.807(b)(2) unless the workers were recruited in the U.S.

SEGREGATED FACILITIES WILL NOT BE USED BY THIS VENDOR, AND SUBCONTRACTORS WILL BE NOTIFIED THAT THEY SHALL NOT MAINTAIN SEGREGATED FACILITIES.

- Vendor HAS , HAS NOT participated in previous work subject to Equal Opportunity.
- Vendor HAS , HAS NOT filed all required Equal Opportunity compliance reports..
- Vendor HAS , HAS NOT developed and has on file Affirmative Action programs.
- Vendor HAS , HAS NOT had previous contracts subject to the written Affirmative Action Program Requirements.

SECTION F – Certification Regarding Cost Accounting System

NOT APPLICABLE TO SMALL BUSINESSES OR CONTRACTS OUTSIDE THE US, US TERRITORIES & POSSESSIONS PER 48CFR9903.201-1

Vendor CAN , CAN NOT comply with the Cost Accounting Standards (CAS)

SEE ONLINE CAS PROGRAM REQUIREMENTS including exemptions and FAR Clause 52.230-1at:
http://farsite.hill.af.mil/reghtml/regs/far2afmcfars/fardfars/far/52_227.htm

If exempt or eligible for modified coverage, indicate why:

Vendor is a Small Business Contract is performed outside the U.S. (incl. territories and possessions): Other: (explain below)

Explain "Other":

Vendor HAS , DOES NOT HAVE an approved accounting system.

Date accounting period ends: _____

Vendor HAS , DOES NOT HAVE approved forward pricing rates.

Vendor HAS , DOES NOT HAVE an approved Disclosure Statement.

Signature of Vendor Admin. Contracting Officer (ACO): _____ Date: _____

Print Vendor Administrative Officer's (ACO) Name: _____

ACO's Telephone Number: _____ ACO's email: _____

Section G – Certification Regarding Quality Assurance

Vendor HAS , DOES NOT HAVE a Quality Assurance System.

TYPE OF QUALITY SYSTEM : ISO 9000; OTHER

Identify "OTHER" Quality System: _____

If ISO 9000 Certified please provide a copy of ISO certification and if possible a copy of your Quality Manual in digital format.

If "OTHER" Certified please provide documentation and if possible a copy of your Quality Manual in digital format.

Vendor: _____

SECTION H- Insurance Requirements and Certification

Required Policy/Coverage	Required Limits
General / Professional Liability Insurance	\$2,000,000
Automobile Liability Insurance	\$1,000,000
Workmen's Compensation Insurance	Per Statutory Requirements
Employers Liability Insurance	\$1,000,000
Excess / Umbrella Liability Insurance	\$5,000,000
Defense Base Act Coverage Insurance (when applicable)	Per Statutory Limits
Aviation Liability Insurance (when applicable)	

Vendor AGREES , DOES NOT AGREE , that in consideration of the selection as a vendor of ACADEMI LLC, the vendor accepts the herein defined Insurance Requirements and shall, prior to the commencement of any work on an ACADEMI facility or worksite, provide ACADEMI LLC with a certificate of insurance, evidencing the herein described policies in accordance with the contract and/or purchase order. The certificate of insurance shall name ACADEMI LLC, its Parent Company, Owners, affiliated and subsidiary companies and all or their respective officers, directors and employees as additional insured on all policies excepting workmen's compensation. All policies required of vendor shall be maintained in full force and effect during the term of the contract and/or purchase order and shall not be cancelled, non-renewed, materially altered or amended without 30 days prior written notice to ACADEMI LLC.

Vendor AGREES , DOES NOT AGREE , to fully and unconditionally protect, defend, indemnify and hold harmless ACADEMI LLC, its Parent Company, Owners, affiliated and subsidiary companies, and all of their respective directors, officers, employees and insurers against all claims, demands, suits and/or clauses of action (including attorney's fees and defense costs) for any property damage, illness of, injury to and/or death of any third party and/or employees, agents, servants, invitees, and representatives of ACADEMI and/or its subcontractors and for damage to or loss of ACADEMI's and/or its subcontractor's property, equipment, materials either owned, operated, or within vendor's charter and/or control. In no manner shall the minimum coverage limits outlined herein limit, restrict or otherwise diminish to any degree the vendor's obligation to defend and indemnify ACADEMI as set forth herein, nor shall the vendor's release, defense and indemnity obligations serve to limit, restrict or otherwise diminish vendor's insurance obligations as set forth herein.

Section I - Certification Regarding Export Compliance

ACADEMI LLC holds its vendors, suppliers, and subcontractors accountable for compliance with ALL U.S. Export Laws and Regulations. ACADEMI LLC requires prior approval be obtained for the export of any controlled technical data provided under any contract. In compliance with ACADEMI's obligations under contracts with the U.S. Government, information concerning the citizenship or immigrant status of a vendor, supplier or subcontractor personnel and the status of a company's ownership is required. This will be requisite before commencement of performance and at any time thereafter, before substituting or adding new personnel to work or in the event a company is sold.

Vendor IS , IS NOT , a U.S. owned company.
If NOT A U.S. OWNED COMPANY provide country of ownership: _____

Vendor IS , IS NOT , a Subsidiary of a Parent company. | If a subsidiary company, provide name and parent country of Ownership Company: _____

Parent Co: _____ Country of Ownership: _____

Vendor HAS , DOES NOT HAVE , manufacturing plants or subsidiaries outside of the United States.

If applicable list the names of each subsidiary or manufacturing plant outside of the USA and its location: **(Attach List if necessary)**

<u>Name</u>	<u>Location /Country</u>
_____	_____
_____	_____
_____	_____

Vendor's Primary Personnel ARE , ARE NOT United States Citizens.

Vendor's Primary Personnel ARE , ARE NOT Foreign Persons as defined by 8 U.S.C. 1101 (a) (20).

Vendor's Primary Personnel ARE , ARE NOT considered protected individuals as defined by 8 USC 1324b (a) (3).

The Vendor certifies that it DOES , DOES NOT , conduct all business operations in full compliance with the requirements of FAR 52.203-7 *Anti-Kickback Procedures*:

The Vendor certifies that it DOES , DOES NOT , conduct all business operations in full compliance with FAR 52.203-11 *Certification and Disclosure Regarding Payment to Influence Certain Federal Transactions*

The Vendor certifies that it DOES , DOES NOT , conduct all business operations in full compliance with the requirements of FAR52.203-12 *Limitation on Payments to Influence Certain Federal Transactions*.

The Vendor certifies that it DOES , DOES NOT , make payments meeting the definition of fees, commissions or political contributions as set forth in 22 CFR §§ 130.5 and 130.6. Vendor agrees to notify Buyer of such payments within 30 days of agreement to make such payments. Vendor agrees to make available at the request of Buyer all records required to make reports under §130.10 and for recordkeeping under §130.14

Vendor: _____

Section J – Certification Regarding Anti-Corruption Compliance

ACADEMI's vendors, suppliers, and subcontractors are required to comply with the U.S. Foreign Corrupt Practices Act ("FCPA") and any other applicable anti-corruption laws with regard to their work for ACADEMI.

The Vendor and its directors, officers, employees, and, to its knowledge, any subcontractors, agents, vendors, representatives, or other third parties that the Vendor engaged in connection with its business for and with ACADEMI HAVE , HAVE NOT , directly or indirectly,

- violated the FCPA or any other applicable anti-corruption law;
- corruptly given, offered, promised, or authorized another to give, offer, or promise any money or any other thing of value to a Government Official (as defined in ACADEMI's Anti-Corruption Policy) for the purpose of improperly obtaining or retaining business or securing any other improper advantage;
- corruptly given, offered, promised, or authorized another to give, offer, or promise any money or any other thing of value to any commercial individual or entity for the purpose of causing the recipient to improperly act or refrain from acting to the benefit of ACADEMI or the Vendor; or
- provided to a Government Official (as defined in ACADEMI's Anti-Corruption Policy) any facilitation payments, political or charitable contributions, or gifts, entertainment, or travel without the express written permission of ACADEMI;

The Vendor and its directors, officers, employees, and, to its knowledge, any subcontractors, agents, vendors, representatives, or other third parties that the Vendor engaged in connection with its business for and with ACADEMI ARE , ARE NOT Government Officials (as defined in ACADEMI's Anti-Corruption Policy).

The Vendor and its directors, officers, employees, and, to its knowledge, any subcontractors, agents, vendors, representatives, or other third parties that the Vendor engaged in connection with its business for and with ACADEMI DO , DO NOT have a family relationship with any Government Official (as defined in ACADEMI's Anti-Corruption Policy), except as disclosed to, and agreed to in writing by, ACADEMI.

Section K – Certification Regarding Human Rights

ACADEMI LLC requires its vendors, suppliers, and subcontractors to comply with all applicable international and domestic laws and other customary practices regarding human rights, as referenced in ACADEMI's Code of Business Ethics and Conduct.

The Vendor certifies that it DOES , DOES NOT conduct all business operations in full compliance with applicable international and domestic human rights laws and other customary practices regarding human rights.

The Vendor certifies that it HAS , HAS NOT acted or failed to act in any way that would undermine, the safety, security, human rights, and fundamental freedoms of any of its internal or external stakeholders.

SECTION L – PAYMENT TERMS

Vendor DOES , DOES NOT offer Prompt Payment Discount
 2% 10/ Net 30 days Other (describe) _____

SECTION M – Vendor Information Certification

The certification statements contained herein concern matters within the jurisdiction of an agency of the United States. Making a false, fictitious, or fraudulent certification may render vendor /subcontractor subject to prosecution under Section 1001, Title 18 of the United States Code. ACADEMI may withhold the award of purchase orders and/or subcontracts based upon any negative responses to the certifications herein and /or vendor's failure to describe the conditions of the response.

Vendor Certifies that all information provided in the ACADEMI Annual Vendor Representations and Certifications is correct and true and agrees that any material changes shall be reported to ACADEMI LLC.

Vendor Name (Print): _____
Print Company Or Contractor Name

Executed By (Signature): _____ Date: _____
Signature

Signer Name & Title _____ Title: _____
Print Name Print Title

INSTRUCTIONS FOR SUBCONTRACTOR SELF-CERTIFICATION (attached)

Purpose: As a U.S. Government Contractor, ACADEMI LLC is **REQUIRED** by the U.S. Government through the Federal Acquisition Regulations to document and report its efforts with respect to small business participation and part of those documentation requirements includes a requirement for participating small businesses and Independent Contractors to execute a Self-Certification. If you are not currently performing on a prime contract please fill out the remainder of the information. We will use it to confirm your status and update your vendor file.

General Guideline:

The form is designed to be filled out in Microsoft Word, printed and signed or e-signed. Clicking on check-boxes will select them with an "X". It may also be printed and filled out by hand, in which case we ask you to print clearly the information requested. . We recommend you save a copy of the file for future reference and updating as changes occur in your status.

Prime Contract Name: Enter the name of the prime contract you're performing on. If you are not currently performing on a Prime Contract with ACADEMI, please leave the line blank.

Prime Contract #: Enter the number of the prime contract you're performing on if you know it, otherwise leave the line blank.

Individual Name: If an individual Independent Contractor, enter your personal name, if a business entity with TIN/EIN leave blank.

Individual SSN: If an independent contractor, enter your Social Security #, if a business entity with TIN/EIN leave blank.

Business Name: If you have a business name, enter your business name, otherwise leave blank

DUNS #: Please provide DUNS if your business has one, otherwise leave blank. (May be obtained free online at: <https://eupdate.dnb.com/requestoptions.asp>)

CAGE Code: Please provide CAGE code if you have one, otherwise leave blank.

TIN/EIN: Provide your business Tax ID Number, or Employer ID Number if you have one, otherwise leave blank and fill in **Social Security Number** (see above)

CONTACT (and related Information): Provide your business contact information, or if an Individual your personal contact information, as applicable.

SELF CERTIFICATION: *Every small business classification may be self-certified, EXCEPT 8a Business and HUBZone.*

BUSINESS TYPE: *(Check either US Business or Foreign Business based on your primary or home-office location)*

BUSINESS SIZE (Check either "Large Business" or "Small Business")

The size standards for subcontractors and suppliers is determined by the NAICS code of the work being performed, with some types of businesses being classified by the number of employees and others being classified by the volume of their business in dollars. **Generally, if you have less than 50 employees and business volume below \$750,000 (US) annually, you fall within the small business limits for all NAICS codes.** For further guidance on size standards for a specific NAICS refer to SBA's website at www.sba.gov/size or contact your local SBA office for assistance. (See <http://www.sba.gov/about-offices-list/2>)

SMALL BUSINESS CATEGORIES (Small Businesses Only): IMPORTANT! CHECK EVERY BOX THAT APPLIES TO YOUR BUSINESS.

Categories are defined by the majority ownership (51% or more) of the business. If your business is minority-owned, including Native American, check the "Small Disadvantaged" box; if the owner is a Veteran **check that box also**; if the owner is a Service-Disabled Veteran **check that box also**; if owner is a Woman **check that box also**. etc. **CHECK EVERY BOX THAT APPLIES TO YOUR BUSINESS.** More guidance on the definitions and qualifications of small business categories is available in the *Federal Acquisition Regulation*, available online at (<https://www.acquisition.gov/far/>)

HUBZone and 8(a) Certifications: HUBZone and 8(a) Certification must be provided by the Small Business Administration.

Among other things, these Certifications require System for Awards Management registration, available online free at: <https://www.sam.gov/portal/public/SAM>
HUBZone Certification may be applied for online via: <http://www.sba.gov/content/applying-hubzone-program>

NAICS Code For Work Being Contracted: Provide applicable 6-digit code. Some examples of commonly used codes in our industry are:

Physical Security Services: 561612	Professional Development Training: 611430
Urgent Medical Care Services 621493	Process, Physical Distribution and Logistics Consulting Services: 541614
Facilities Support Services 561210	Commercial & Institutional Building Construction: 236220
Management Consulting Services: 541611	Misc. Schools & Instruction: 611699

For further guidance on identifying your NAICS Code please refer to the guides available online at: <http://www.naics.com/search.htm>

PRIMARY NAICS CODE: (Only required if you are certifying as a Small Disadvantaged Business) May be the same code you are working under.

Further Assistance:

If further assistance is required, please do not hesitate to contact the ACADEMI Small business Liaison Officer identified below with your questions.

After completing and signing the form please return the completed form via email or FAX to the individual who sent it to you or to:

Attn: Small Business Liaison Officer.:

Email: SBLO@academi.com

Phone: 252-435-1937

FAX: 252-435-1918

SEE DIRECTIONS ON PREVIOUS PAGE

Prime Contract Name/Desc: _____ Prime Contract #: _____
(See PO or Subcontract-Leave Blank if Unknown)

Individual Name: _____		<small>(Individual Only)</small> SSN: _____	
Business Name: (Insert Name or N/A) _____		DUNS #: _____	
CAGE Code: _____ <small>If Applicable (DoD assigned Commercial And Government Entity Code)</small>		TIN / EIN: _____	
Contact _____			
<small>Last Name</small> _____		<small>First Name</small> _____	
<small>MI</small> _____		<small>Title</small> _____	
Address: _____			
<small>Street</small> _____		<small>City</small> _____	
<small>State</small> _____		<small>Zip</small> _____	
Country: _____		Phone: _____	
Fax: _____		Mobile: _____	
Email: _____			

SELF-CERTIFICATION
(Note: In Microsoft Word, clicking on a check-box will cause it to be selected with an "X")

BUSINESS TYPE: U. S. BUSINESS FOREIGN BUSINESS:

BUSINESS SIZE: SMALL (Includes Independent Contractors) LARGE BUSINESS (Includes Non-profit)

IF classified as a LARGE Business: Vendor HAS , DOES NOT HAVE , a Small Business Development Plan.

IF classified as a SMALL Business, Vendor also meets the requirements of the categories below: **CHECK ALL BOXES THAT APPLY.**

Small Disadvantaged Business (Includes Minority-Owned): SBA Certified HUBZone Business: Woman-Owned Business:

Small Veteran-Owned Business: Alaskan Native Corporation: Indian Tribe:

Small Service Disabled Veteran Owned Business: Historically Black College/University or Minority Institution:

SBA Certified 8a Business: Other: (describe other subcategory)

ONLY IF Self-Certifying As A SMALL BUSINESS, Provide the following Information For The Work You Are Currently Contracted To Perform:
NAICS CODE For Work Being Contracted ⁵: _____ (Free Online NAICS Search: <http://www.naics.com/search.htm>)

ONLY If You Are Self-Certifying As A SMALL DISADVANTAGED BUSINESS please furnish your primary NAICS code ⁵:

⁵ NAICS codes are REQUIRED for the Summary Subcontract Report breakout report (by 3-digit NAICS subsector) that the prime contractor is required to submit to the Government annually pursuant to the Federal Acquisition Regulation (FAR) clause at 52.219-9(l)(2)(iii)

IMPORTANT!
 You may wish to review the definitions for the above small business categories in the Federal Acquisition Regulation (FAR) 19.7 or 52.219-8 (<https://www.acquisition.gov/far/>) if you have difficulty ascertaining your size status, please refer to SBA's website at www.sba.gov/size or contact your local SBA office for assistance. (See <http://www.sba.gov/about-offices-list/2>)

Under 15 U.S.C. 645(d), any person who misrepresents its size status shall (1) be punished by a fine, imprisonment or both; (2) be subject to administrative remedies; and (3) be ineligible for participation in programs conducted under the authority of the Small Business Act.

Executed By (Signature): _____ E-signed Date: _____
Signature

Signer Name & Title _____ Title: _____
Print Name Print Title

UPON COMPLETION AND EXECUTION PLEASE RETURN THIS FORM TO THE ACADEMI SOURCE THAT PROVIDED IT TO YOU

ACADEMI INTERNAL USE ONLY	
<small>Init.</small> HUBZone Status has been verified of ____/____/____	<small>Init.</small> 8a Certification has been verified as of ____/____/____
<small>Init.</small> Data has been entered into COSTPOINT as of ____/____/____	
Internal Document Routing: Signed & returned forms go to ACADEMI Accounts Payable for data entry and then to ACADEMI Small Business.	

Email: SBLO@academi.com Phone: 252-435-1937 FAX: 252-435-1918