CERTIFICATION OF QUALIFIED PRODUCTS

(To be completed by manufacturer or manufacturer's representative)

OMB No. 0704-0487 OMB approval expires September 30, 2024

The public reporting burden for this collection of information is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or burden reduction suggestions to the Department of Defense, Washington Headquarters Services, at whs.mc-alex.esd.mbx.dddod-information-collections@mail.mil. (0704-0487). Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number.

PLEASE DO NOT RETURN YOUR FORM TO THE ABOVE ORGANIZATION. RETURN COMPLETED FORM TO THE ADDRESS BELOW.

Please complete a separate form for each plant location producing products qualifying to the specification listed in Block 1. Please certify that the products listed in Block 2 are available and the conditions in Block 5 are still accurate. After completion, please sign the form digitally or print and sign the form, then either scan and email it - or fax it - to the Qualifying Activity for the document in Block 1 to:

GOVERNING SPECIFICATION/STANDARD (Include Title and revision/	2. MANUFACTURER'S DESIGNATION(S) (If more space is needed, continue
amendment number if applicable)	in Block 4, "Remarks".)
3. COMPANY DATA	
a. MANUFACTURER'S LEGAL BUSINESS NAME	
b. POINT OF CONTACT	
(1) NAME (Last. First. Middle Initial)	(2) ADDRESS (Include ZIP Code)
(1) White (East, 1 hist, Whate linear)	(2) ADDITEGO (Michael Ziii Godd)
(3) TELEPHONE (Include Area Code)	(4) EMAIL ADDRESS
c. PLANT PHYSICAL ADDRESS, CAGE CODE, AND OWNING COMPANY	d. MANUFACTURER'S LEGAL BUSINESS MAILING ADDRESS AND CAGE CODE (If Plant and Manufacturer Legal Business/Corporate addresses are not
NAME (For the plant manufacturing the products in Block 2)	co-located.)
PLANT CAGE*	
CODE:	CAGE* CODE:
*Commercial and Government Entity (CAGE) Code: A CAGE Code is required t CAGE Code, go to www.sam.gov. If you experience problems, call toll free: 1-8	
4. REMARKS (Attach additional pages as needed. Please indicate at the top of	
Code). For example, addresses & respective CAGE Codes for additional qualified plants. Disclose if form submitter is a Rebrander or a Repackager, if	
applicable.	
5. THE UNDERSIGNED, A RESPONSIBLE OFFICIAL OF MANAGEMENT, HEREBY CERTIFIES TO THE FOLLOWING STATEMENTS EXCEPT AS	
MODIFIED UNDER REMARKS.	
a. Listed product(s) is (are) still manufactured at the plant address shown in 3.c. above.	
b. Plant is under same management.	
c. Product(s) is (are) being manufactured under the same conditions as originally qualified, i.e., same process, materials, construction, design, and manufacturer's designation.	
d. Product(s) will meet the requirements and tests of latest effective issue of sp	ecification/standard.
e. Company name and addresses for CAGE Codes in Block 3 are current in the	e www.sam.gov database.
f. TYPED OR PRINTED NAME (Last, First, Middle Initial)	g. POSITION TITLE
h. SIGNATURE	i. DATE SIGNED (YYYYMMDD)
PDEVIOUS	EDITION IS OBSOLETE AFM Designer Page 1 of 1