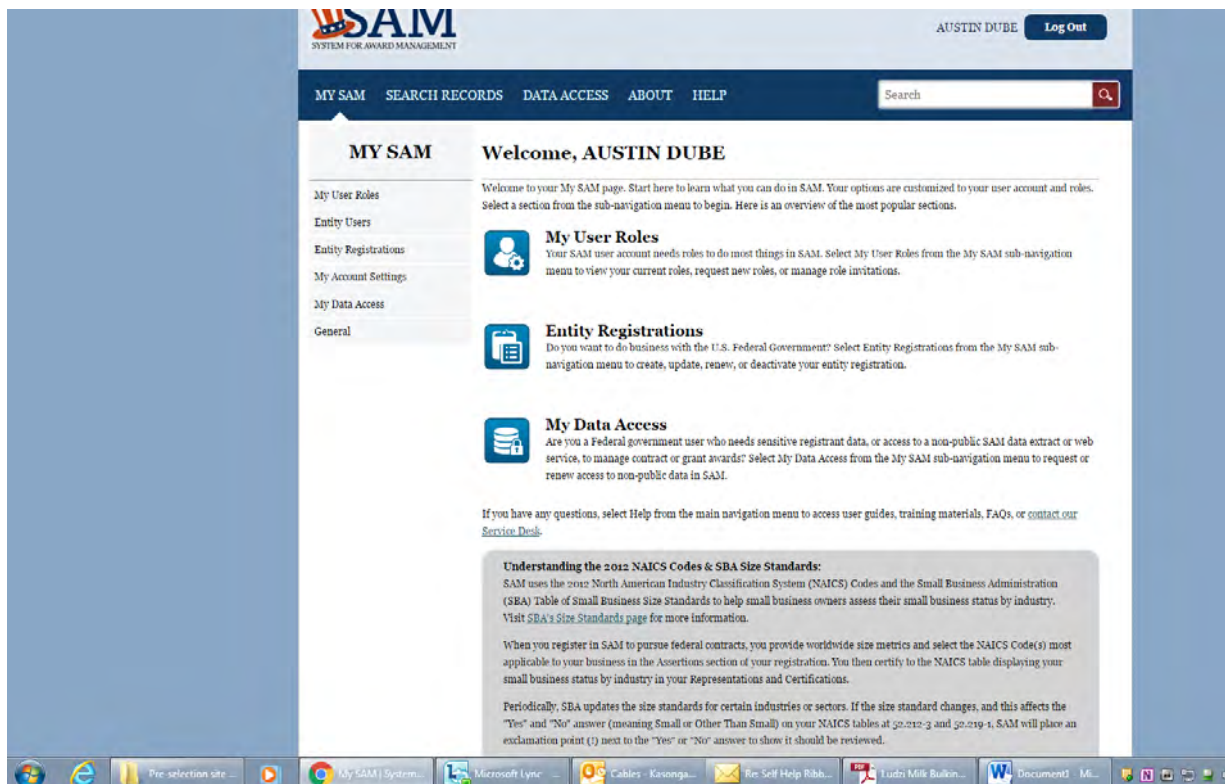
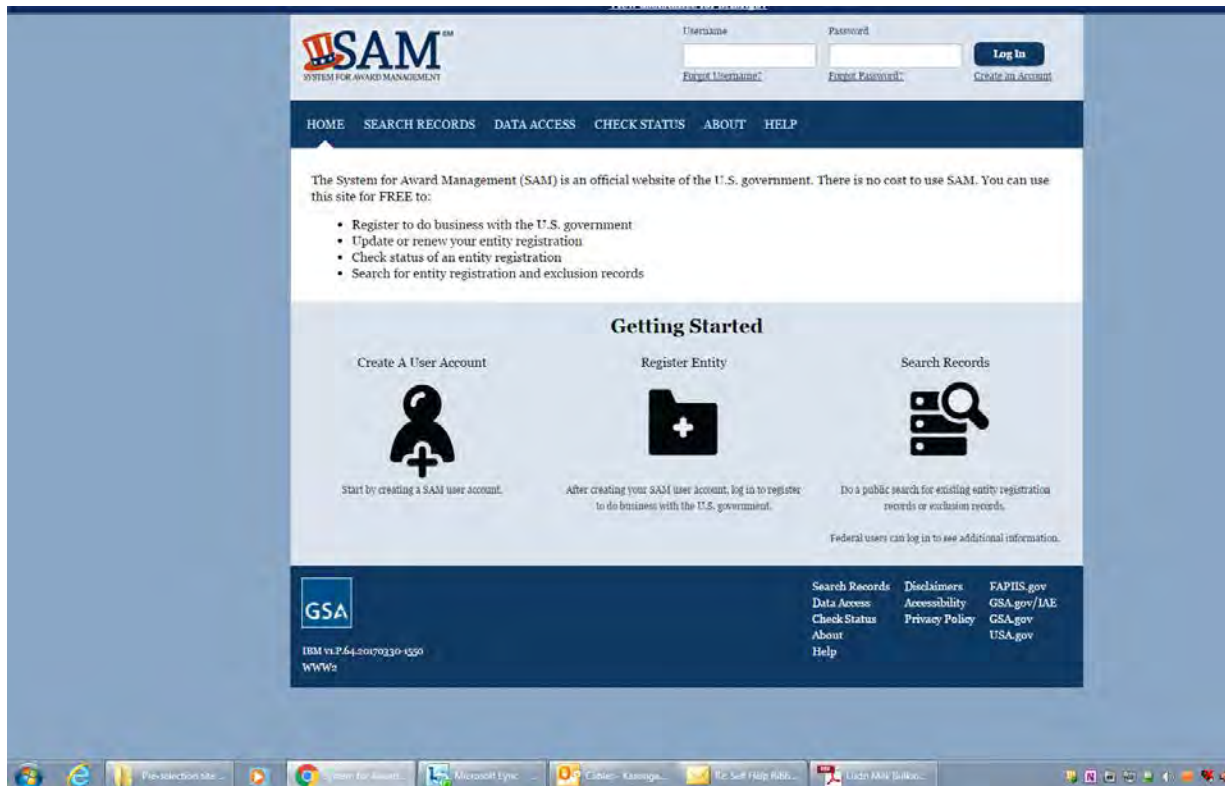


SYSTEM FOR AWARD MANAGEMENT REGISTRATION STEP BY STEP GUIDANCE



Registration Overview | X

Secure | https://www.sam.gov/portal/SAM/Navigation?state=1BPN5_y0A8XdcACJqTZXheC5mYWNlq5yB3yB6GV0t1pZGdiLUNuVWFFK0BAAAAQApdmldzPNTlmiNTQ4ZG9ODk1RjQWQWY1NEY5IjE2ZDQ0YDZUJS

View assistance for Overview - Registration Overview

AUSTIN DUBE Log Out

MY SAM SEARCH RECORDS DATA ACCESS ABOUT HELP

Register Entity

Overview

Registration Overview

Purpose of Registration

Core Data

Representations and Certifications

Points of Contact

Submit Certification

[BACK TO USER DASHBOARD](#)

Overview

Registration Overview

Content Glossary

Status Indicators:

BEFORE YOU START

You will need the following information:

U.S. REGISTRANTS:

- Your DUNS Number, Legal Business Name, and Physical Address from your Dun & Bradstreet (D&B) record.
- If you don't have one, you can [request a DUNS Number for free](#) from D&B
- Your Taxpayer Identification Number (TIN) and Taxpayer Name associated with your TIN. Review your tax documents from the IRS (such as a 1099 or W-2 form) to find your Taxpayer Name.
- Your bank's routing number, your bank account number, and your bank account type, i.e. checking or savings, to set up Electronic Funds Transfer (EFT).

INTERNATIONAL REGISTRANTS:

- Your NATO Commercial And Government Entity (NCAGE) Code from the NATO Support and Procurement Agency (NSPA).
- If you don't have one, you can [request an NCAGE Code online for free](#) from NSPA
- Your DUNS Number, Legal Business Name, and Physical Address from your Dun & Bradstreet (D&B) record. Make sure your DUNS information and NCAGE information match.
- If you don't have one, you can [request a DUNS Number for free](#) from D&B

CANCEL

CONTINUE

Determine Purpose | System

Secure | https://www.sam.gov/portal/SAM/navigation?state=JBRP5_J0G8X5aCqYKZhwCSmYWNlcy5wb3J0bGV0YnRlZGdlLnU1QVRFQ0EAAAQApmltzeG0MTYwNDNM5JN2NlTQY2W0YTY2Y0Y2GMYYA0G8

View assistance for Purpose of Registration-Determine Purpose of Registration

MY SAM SEARCH RECORDS DATA ACCESS ABOUT HELP

Search

Register Entity

Overview

Purpose of Registration

Determine Purpose

Confirm Purpose

Core Data

Representations and Certifications

Points of Contact

Submit Certification

Content Glossary

Status Indicators

Registration Purpose

Entity Type

Page Description

This page will help you determine your entity's purpose of registration. First, select what type of entity you are registering in SAM. Then state why you are registering. Based on your response, you will complete different registration sections.

If you want to obtain federal contract awards, you must complete all four sections of the registration: Core Data, American Representations & Certifications (Reps & Certs), and Points of Contact (POCs). This is required by the Federal Acquisition Regulation (FAR) in FAR 32.201-7 System for Award Management.

If you are only interested in federal assistance opportunities, such as grants and loans, you must complete two sections of the registration: Core Data and POCs. If you decide later to pursue federal contract awards, you must update your SAM registration to change your purpose of registration and complete all four sections.

Mandatory fields are marked with an asterisk or star symbol. Complete all mandatory fields before continuing to the next page.

BACK TO USER DASHBOARD

What type of entity are you registering*?

☐ Business or Organization

☐ U.S. State Government

☐ U.S. Local Government

☐ Tribal Government

☐ Foreign Government

Why are you registering this entity to do business with the U.S. government*?

☐ I want to be able to bid on federal contracts or other procurement opportunities. I also want to be able to apply for grants, loans, and other financial assistance programs.

☐ I only want to apply for federal assistance opportunities like grants, loans, and other financial assistance programs.

CANCEL PREVIOUS NEXT

Search Records Data Access Disclaimers Accessibility FAPIS.gov GSA.gov/IAE

Confirm Purpose | System

Secure | https://www.sam.gov/portal/SAM/navigation?state=JBRP5_J0G8X5aCqYKZhwCSmYWNlcy5wb3J0bGV0YnRlZGdlLnU1QVRFQ0EAAAQApmltzeG0MTYwNDNM5JN2NlTQY2W0YTY2Y0Y2GMYYA0G8

View assistance for Purpose of Registration-Confirm Purpose

MY SAM SEARCH RECORDS DATA ACCESS ABOUT HELP

Search

Register Entity

Overview

Purpose of Registration

Confirm Purpose

Core Data

Points of Contact

Submit Certification

Content Glossary

Status Indicators

Page Description

Based on the answers you provided on the previous page, SAM determined your purpose of registration and the sections you must complete based on that purpose of registration. If you need to make changes, please go back to the previous page. Otherwise, use the Next button to continue with the Entity Registration process.

Purpose of Registration:

You are required to complete the following sections:

Federal Assistance Awards Only

Core Data

Points of Contact

BACK TO USER DASHBOARD CANCEL PREVIOUS NEXT

GSA

IBM v1.0.0-20170330-1330

W/W/W

Search Records Data Access About Help Disclaimers Accessibility Privacy Policy FAPIS.gov GSA.gov/IAE GSA.gov USA.gov

View assistance for Core Data - DUNS Information

SAM
SYSTEM FOR ARMED MANAGEMENT

AUSTIN DUBE Log Out

MY SAM SEARCH RECORDS DATA ACCESS ABOUT HELP

Register Entity

Overview
Purpose of Registration
Core Data
DUNS Information
Verify DUNS Information
Business Information
CAGE or NCAGE Code
General Information
Financial Information
Executive Compensation Questions
Proceedings Questions
SAM Search Authorization
Review Core Data
Points of Contact
Submit Certification

BACK TO USER DASHBOARD

Core Data
DUNS Information

Page Description
Please enter the information associated with the unique identifier of the entity you want to register, i.e. the information for the DUNS Number you were assigned by Dun & Bradstreet (D&B).
Mandatory fields are marked with an asterisk or star symbol. Complete all mandatory fields before continuing to the next page.

Unique Identifier
DUNS Number: 961223001
If you don't already have one, you can request a DUNS Number for FREE from Dun & Bradstreet (D&B). For help, U.S. businesses contact D&B via 855-my-sam or go@dab.com. International entities can email SAMhelp@dab.com.

Entity Name
D&B Legal Business Name: Action Hope Malawi

DUNS Physical Address
Please enter the physical address associated with this DUNS number. Your DUNS registration will not be activated if you send a mailing address to set your DUNS Number.

Address Line 1: Zomba-Blantyre Road
Address Line 2: Namadzi
City: Zomba
State/Province:
ZIP/Postal Code:
Country: MALAWI

CANCEL PREVIOUS NEXT

Country
Enter your country as it appears in your DUNS number record at D&B.

Content Glossary
Status Indicators:
Core Data:
DUNS/D&BAC:
Name:
Address:

View assistance for Core Data - NCAGE Code

SAM
SYSTEM FOR ARMED MANAGEMENT

AUSTIN DUBE Log Out

MY SAM SEARCH RECORDS DATA ACCESS ABOUT HELP

Register Entity

Overview
Purpose of Registration
Core Data
DUNS Information
Verify DUNS Information
Business Information
CAGE or NCAGE Code
General Information
Financial Information
Executive Compensation Questions
Proceedings Questions
SAM Search Authorization
Review Core Data
Points of Contact
Submit Certification

BACK TO USER DASHBOARD

Core Data
NCAGE Code

Page Description
As an international registrant, you must enter your NATO Commercial and Government Entity (NCAGE) Code. If you don't have one, use the NCAGE Request Tool to request one from NATO. You can also use the NCAGE Request Tool to search for your NCAGE Code. Once you receive your NCAGE Code from NATO, search to make sure it appears in the U.S. CAGE Database correctly. You cannot continue registering in SAM without an NCAGE Code that exists in the U.S. CAGE Database.
Mandatory fields are marked with an asterisk or star symbol. Complete all mandatory fields before continuing to the next page.

Does your entity already have a NCAGE Code? Yes No

NCAGE Code: Search for NCAGE Code

CANCEL PREVIOUS SAVE AND CONTINUE

Content Glossary
CAGE/NCAGE:

Search Records
Data Access
About
Disclaimers
Accessibility
Privacy Policy
FAPIS.gov
GSA.gov/IAE
GSA.gov

Business Information | [Home](#) | [Help](#) | [Feedback](#)

Secure | https://www.sam.gov/portal/SAM/Navigation?state=JBPNs_rD0ABXsACiqYXZheC5mYVINIq5wb3I0bGVYpZGdLNUQVfX0IEAAAAQApomIcz01YmIsMDUxNy0wMmVmLTRMDYtYWZmYy01ZDE3M2E2MmQshNmMA819RtU9

View assistance for Core Data - Business Information

MPIN acts as your password in these systems and you should guard it as such. The MPIN must be nine characters long and contain at least one letter, one number, and no spaces or special characters.

Points of Contact

Submit Certification

[BACK TO USER DASHBOARD](#)

Physical Address - Namadri

Address Type: Physical

Address Line 1: Zomba-Bhantyre Road

Address Line 2:

City: Namadri

State/Province:

ZIP/Postal Code:

Country: MALAWI

Mailing Address - Namadri

Address Type: Mailing

Address Line 1: Zomba-Bhantyre Road

Address Line 2: P.O. Box 20

City: Namadri

State/Province:

ZIP/Postal Code:

Country: MALAWI

[COPY PHYSICAL ADDRESS](#)

Taxpayer Identification Number (TIN):

Select your TIN Type. Most entities who pay U.S. taxes select Employer Identification Number (EIN). If you don't have one, you can [request an EIN online from the IRS](#) for free. If you are a Sole Proprietor or a single member Limited Liability Company (LLC), you may select Social Security Number (SSN). Choose carefully. You cannot change your TIN Type once you navigate beyond this page.

TIN Type: Please select a value. Note: If you select EIN as your TIN Type on this page, you must select either Sole Proprietorship or Limited Liability Company on the General Information page later during the registration.

TIN:

[CANCEL](#) [PREVIOUS](#) [SAVE AND CONTINUE](#)

[Search Records](#) [Disclaimers](#) [FAPIS.gov](#)
[Data Access](#) [Accessibility](#) [GSA.gov/IAF](#)

General Information | 5 |

Secure | https://www.sam.gov/portal/SAM/registrationstate/JPNS_C0ABXdcACjgY2heC5mYWNlc5wbLj0bGV0YnpZGslLNUQVRFRXDEAAAAQAdmldt2MzQ3MjZlLmQDNLTQ5ZTktOWVhZC04MwYwM2JlN0RlZAB19RUSGKLE

View assistance for Core Data - General Information

SAM
SYSTEM FOR AMB MANAGEMENT

AUSTIN DUBE Log Out

MY SAM SEARCH RECORDS DATA ACCESS ABOUT HELP

Search

Register Entity

Overview

Purpose of Registration

Core Data

DUNS Information

Verify DUNS Information

Business Information

CAGE or NCAGE Code

General Information

Financial Information

Executive Compensation Questions

Proceedings Questions

SAM Search Authorization

Review Core Data

Point of Contact

Submit Certification

BACK TO USER DASHBOARD

Core Data

General Information

DUNS: 94423001 NCAGE Code: 5CTB0

Page Description

Please enter the business type information for your entity. Select the applicable business types by using the drop-down menus and selecting any check-boxes that apply.

Mandatory fields are marked with an asterisk star symbol. Complete all mandatory fields before continuing to the next page.

Business Information:

Country of Incorporation: * Please select a value

Company Security Level: Please select a value

Highest Employee Security Level: Please select a value

Business Types:

You have categorized your entity as a: **Business or Organization.**

Does your entity qualify as one of the following (if none are applicable, select Not Applicable from the drop-down menu):

Not Applicable

Is your business certified by a state certifying agency as a Department of Transportation (DOT) Disadvantaged Business Enterprise (DBE)?

No

If your organization is a Federally Recognized Native American Entity choose all that apply:

NATIVE AMERICAN ENTITY TYPE

☐ Alaskan Native Corporation Owned Firm

☐ American Indian Owned

☐ Indian Tribe (Federally Recognized)

☐ Native Hawaiian Organization Owned Firm

☐ Tribally Owned Firm

Content Glossary

Business Information

IGT Only (For IGT Registrations Only):

Business Types - Government Entities Only:

Business Types:

Types of Educational Institutions (only if Educational Institution is selected):

Department of Transportation (DOT) Disadvantaged Business Enterprise (DBE):

Federally Recognized Native American Entity:

Business/Organization Type:

Business/Organization as Defined by IRS:

Business/Organization Profit Structure:

Socio-Economic Categories:

Types of Minority Owned Businesses (Only if Minority Business Was Selected):

General Information | 5 |

Secure | https://www.sam.gov/portal/SAM/registrationstate/JPNS_C0ABXdcACjgY2heC5mYWNlc5wbLj0bGV0YnpZGslLNUQVRFRXDEAAAAQAdmldt2MzQ3MjZlLmQDNLTQ5ZTktOWVhZC04MwYwM2JlN0RlZAB19RUSGKLE

View assistance for Core Data - General Information

Submit Certification: No

BACK TO USER DASHBOARD

If your organization is a Federally Recognized Native American Entity choose all that apply:

NATIVE AMERICAN ENTITY TYPE

☐ Alaskan Native Corporation Owned Firm

☐ American Indian Owned

☐ Indian Tribe (Federally Recognized)

☐ Native Hawaiian Organization Owned Firm

☐ Tribally Owned Firm

Is your business/organization one of the following? If none of these values apply to your entity, select Not Applicable from the drop-down menu. NOTE: If you are a Manufacturer of Goods, you may also make one other selection. First select Manufacturer of Goods, then another drop-down box will display:

Not Applicable

Please indicate the form of your Business or Organization as defined by the IRS:

Please select a value

What is your organization's profit structure? Please select one of the following:

Please select a value

If your business qualifies as one of the following Socio-Economic Categories, check all that reflect the current status of your business. Small business status will automatically be derived from the receipts, number of employees, assets, or megawatt hours, and NAICS codes entered in the Assertions portion of the registration

SOCIO-ECONOMIC CATEGORIES

☐ Veteran Owned Business

☐ Woman Owned Business

☐ Joint Venture Woman-Owned Small Business

☐ Joint Venture Economically Disadvantaged Woman-Owned Small Business

☐ Community Development Corporation Owned Firm

☐ Minority Owned Business

CANCEL **PREVIOUS** **SAVE AND CONTINUE**

Business/Organization as Defined by IRS:

Business/Organization Profit Structure:

Socio-Economic Categories:

Types of Minority Owned Businesses (Only if Minority Business Was Selected):

Financial Information | View assistance for Core Data - Financial Information

SAM
SYSTEM FOR AMBASSADOR MANAGEMENT

AUSTIN DUBE Log Out

MY SAM SEARCH RECORDS DATA ACCESS ABOUT HELP

Register Entity

Overview
Purpose of Registration
Core Data
Financial Information
Business Information
CAGE or NCAGE Code
General Information
Financial Information
Executive Compensation Questions
Proceedings Questions
SAM Search Authorization
Review Core Data

Points of Contact
Submit Certification

BACK TO USER DASHBOARD

Core Data

Financial Information

Page Description
Please enter the requested information about the entity you are registering. The financial information you provide on this page will be used for payment purposes if you receive a Federal award.
Mandatory fields are marked with an asterisk or star symbol. Complete all mandatory fields before advancing to the next page.

Do you accept credit cards as a method of payment? ☐ Yes ☐ No

New Account

Electronic Funds Transfer (EFT):
EFT information is optional for Non-U.S. Businesses and Organizations. If you choose to provide this information, you must enter an ABA Routing Number, Account Number, and Account Type.

Account Type:

Financial Institute:
ABA Routing Number:
Account Number:
Locobot Number:

Automated Clearing House (ACH):
If you entered EFT information above, then at least one method of contact must be provided for your financial institution. Otherwise, this section should be left blank.

A.C.H. U.S. Phone:
A.C.H. Non-U.S. Phone:
A.C.H. Fax:
A.C.H. Email:

Content Glossary
Credit Card Usage:
Delinquent Federal Debt:
IGT Financial Info (Applicable only for IGT registrants):
Electronic Funds Transfer:
Add New Account Details:
Automated Clearing House (ACH):
Remittance Information:

Financial Information | View assistance for Core Data - Financial Information

Processing...

Points of Contact
Submit Certification

BACK TO USER DASHBOARD

A.C.H. U.S. Phone:
A.C.H. Non-U.S. Phone:
A.C.H. Fax:
A.C.H. Email:

Remittance Address:
You must provide an address to mail a check to if EFT is unavailable.

Name:
Address Line 1:
Address Line 2:
City:
State/Territory:
Country:
ZIP/Postal Code:

Only add an additional account if you have more than one set of U.S. banking information for this DUNS number.

Save Primary banking information can be changed by entering over the ABA Routing Number and Account Number and saving the page.

GO BACK PREVIOUS SAVE AND CONTINUE

GSA
IBM 1117442070030 4330
WORKS

Search Records
Data Access
About
Help

Disclaimers
Accessibility
Privacy Policy

FAPIS.gov
GSA.gov/IAE
GSA.gov
USA.gov

Executive Compensation

Secure | https://www.sam.gov/portal/SAM/registrationstate/8PbV5_rDQ48Xds6ChYQ2hc3mFWbly5wEJ0n6VDYnp7GetJNUQ9V3X06AAAAQApmIu0z2MTYufumjy53/MmZuTERMDfryrN0Z2WMSMT6yCDNmeV4R15HrD5G33P

View assistance for Core Data - Executive Compensation Questions

SAM
SYSTEM FOR AMBASSADOR MANAGEMENT

AUSTIN DUBE Log Out

MY SAM SEARCH RECORDS DATA ACCESS ABOUT HELP

Search

Register Entity

Overview

Purpose of Registration

Core Data

DUNS Information

Verify DUNS Information

Business Information

CAGE or NCAGE Code

General Information

Financial Information

Executive Compensation Questions

Proceedings Questions

SAM Search Authorization

Review Core Data

Points of Contact

Submit Certification

BACK TO USER DASHBOARD

Core Data

Executive Compensation Questions

DUNS: 06023004 NCAGE Code: SCYH

Page Description

Please answer the following question to determine if you need to provide total compensation details for the five (5) most highly compensated executive in your business or organization. In accordance with the Federal Funding Accountability and Transparency Act (FFATA) of 2006, as amended in 2008, your responses will be displayed to the public on USAspending.gov in association with any eligible federal award your entity receives.

Mandatory fields are marked with an asterisk or star symbol. Complete all mandatory fields before continuing to the next page.

Executive Compensation:

In your business or organization's preceding completed fiscal year, did your business or organization (the legal entity to which this specific SAM record, represented by a DUNS number, belongs) receive both of the following:

1. 80 percent or more of your annual gross revenues in U.S. federal contracts, subcontracts, loans, grants, subgrants, and/or cooperative agreements; and
2. \$25,000,000 or more in annual gross revenues from U.S. federal contracts, subcontracts, loans, grants, subgrants, and/or cooperative agreements?

Please select a value

Does the public have access to information about the compensation of the senior executives in your business or organization (the legal entity to which this specific SAM record, represented by a DUNS number, belongs) through periodic reports filed under section 3(a) or 15(d) of the Securities Exchange Act of 1934 (15 U.S.C. 78m(a), 78(d)) or section 6034 of the Internal Revenue Code of 1986?

Not Applicable

CANCEL PREVIOUS SAVE AND CONTINUE

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11:02 AM 6/6/2017

Proceedings Questions

Secure | https://www.sam.gov/portal/SAM/registrationstate/8PbV5_rDQ48Xds6ChYQ2hc3mFWbly5wEJ0n6VDYnp7GetJNUQ9V3X06AAAAQApmIu0z2Z2MmWwMCDmTf6T6xvLH0D6Z0ryVwYmQDNPN09M0p8L19HrD5G33P

View assistance for Core Data - Proceedings Questions

SAM
SYSTEM FOR AMBASSADOR MANAGEMENT

AUSTIN DUBE Log Out

MY SAM SEARCH RECORDS DATA ACCESS ABOUT HELP

Search

Register Entity

Overview

Purpose of Registration

Core Data

DUNS Information

Verify DUNS Information

Business Information

CAGE or NCAGE Code

General Information

Financial Information

Executive Compensation Questions

Proceedings Questions

SAM Search Authorization

Review Core Data

Points of Contact

Submit Certification

BACK TO USER DASHBOARD

Core Data

Proceedings Questions

DUNS: 06023004 NCAGE Code: SCYH

Page Description

Please answer the following Proceedings question about the entity you are registering. SAM collects information about proceedings only if you meet the conditions set forth in FAR 20.209-7, FAR 20.209-8, or 2 C.F.R. 200 Appendix XII. This information is not displayed in SAM. It is sent to FAPIS.gov for display as applicable.

Mandatory fields are marked with an asterisk or star symbol. Complete all mandatory fields before continuing to the next page.

Proceedings:

Has your business or organization, as represented by the DUNS number on this specific SAM record, been awarded a Federal assistance award that contains the award term and condition described in 2 C.F.R. 200 Appendix XII?

Please select a value

Does your business or organization, as represented by the DUNS number on this specific SAM record, have current active Federal contracts and/or grants with total value (including any exercised/unexercised options) greater than \$50,000,000?

Not Applicable

Within the last five years, had the business or organization (represented by the DUNS number on this specific SAM record) and/or any of its principals, in connection with the award to or performance by the business or organization of a Federal contract or grant, been the subject of a Federal or State:

1. Criminal proceeding resulting in a conviction or other acknowledgment of fault;
2. Civil proceeding resulting in a finding of fault with a monetary fine, penalty, reimbursement, restitution, and/or damages greater than \$5,000; or other acknowledgment of fault; and/or
3. Administrative proceeding resulting in a finding of fault with either a monetary fine or penalty greater than \$5,000 or reimbursement, restitution, or damages greater than \$50,000; or other acknowledgment of fault?

Not Applicable

CANCEL PREVIOUS SAVE AND CONTINUE

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11:04 AM 6/6/2017

POC Details | System for X

Secure | https://www.sam.gov/portal/SAM/?navigationState=JBPNS_rD0ABXdcAClqYKZheC5mYWNlcy5wb3J0bGV0VnlpZGdlbnUQYXRFX0EAAAAAQpdmldldyYzZmM1IjRIMDg0OTUyN0M0G0VhbmUzMDZAYTcAB184RU9GX18*

View assistance for Points of Contact - POC Details

Processing...

First Name: [text]
Last Name: [text]
Title: [text]
Email: [text]
US Phone: [text]
Extension: [text]
Mobi US Phone: 265-999270780
US Fax: [text]
Notes: [text]
Address Line 1: PO Box 20
Address Line 2: [text]
City: Namadji
State/Province: [text]
ZIP/Postal Code: [text]
Country: MALAWI

Additional Points of Contact

- Optional POC
- Full Performance POC
- Full Performance Alternate POC
- Current Business Alternate POC
- Government Business Alternate POC

Cancel Add Optional POC

REFRESH SAVE AND CONTINUE

GSA

IBM v1.2.4.2000330 10/27/2017

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Waiting for www.sam.gov...

Entity Review | System for X

Secure | https://www.sam.gov/portal/SAM/?navigationState=JBPNS_rD0ABXdcAClqYKZheC5mYWNlcy5wb3J0bGV0VnlpZGdlbnUQYXRFX0EAAAAAQpdmldldyYzZmM1IjRIMDg0OTUyN0M0G0VhbmUzMDZAYTcAB184RU9GX18*

View assistance for Submit Certification - Entity Review

ZIP/Postal Code: [text]

Government Business POC

Title: Mr
First Name: Stanley
Middle Name: C
Last Name: Adam
Email: info@activeopenmarket.org
US Phone: [text]
Extension: [text]
Mobi US Phone: 262-999270780
Notes: [text]
Address Line 1: PO Box 20
Address Line 2: [text]
City: Namadji
State/Province: [text]
Country: MALAWI
ZIP/Postal Code: [text]

By submitting this registration, you are certifying the information is accurate and complete. Knowingly providing false or misleading information may result in criminal prosecution under Section 1005, Title 18 of the United States Code. Criminal Penalties could include imposition of a fine, imprisonment, or both. You may be subject to other penalties as well, including, but not limited to, administrative remedies, such as suspension and debarment; ineligibility to participate in programs conducted under the authority of the Small Business Act; or civil liability under the False Claims Act.

Cancel Submit

GSA

IBM v1.2.4.2000330 10/27/2017

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