



Vendor Compliance Certification

In connection with the operation of your business and your performance under agreements with P3I, Incorporated (P3I), you (the vendor) represent that: (i) you are in compliance with all applicable laws, statutes, rules and regulations, including, without limitation, the provisions of the following laws and regulations, as amended from time to time: 38 U.S.C. Sections 4211 and 4212 and Executive Order 1170138 F.R. 2075 pertaining to the listing of employment openings, Section 60-1.40 of Title 41 of the Code of Federal Regulations relating to Affirmative Action Compliance Programs, Section 202 of Executive Order 11246 pertaining to Equal Opportunity, 41 CFR Part 60-741.4 and Public Law 95-507 Executive Order 12138 pertaining to the utilization of Small, Minority and Women’s Business Enterprises, 32 Fed. Reg. 7439, 19 May 1967 pertaining to Nonsegregated Facilities, and The Vietnam Veterans Assistance Act of 1974 and the Veterans Employment Opportunity Act of 1998; and (ii) you make employment, pay and promotion decisions without regard to race, color, religion, sex, age, national origin or ancestry, or other factors unrelated to a person's ability to do the job, and these factors include any number of considerations such as physical or mental handicap, marital status, family responsibilities, sexual orientation, political affiliation, etc.

P3I strives to utilize vendors who are small business concerns, veteran-owned small business concerns, HUBZone small business concerns, small disadvantaged business concerns, and women-owned small business concerns.

Please advise below if you meet any of these criteria.

We hereby certify that we meet the requirements for the following type of business as set forth in applicable governmental regulations, including 15 U.S.C. Chapter 14A:

<input type="checkbox"/>	WBE	Women Business Enterprise / Women Owned
<input type="checkbox"/>	MBE	Minority Business Enterprise / Minority Owned
<input type="checkbox"/>	SBE	Small Business Enterprise
<input type="checkbox"/>	VET	Veteran Business Enterprise / Veteran Owned
<input type="checkbox"/>	DVBE	Disabled Veteran Business Enterprise
<input type="checkbox"/>	DBE	Disabled Business Enterprise
<input type="checkbox"/>	SDB	Small Disadvantaged Business
<input type="checkbox"/>	HUB	HubZone Operated Area
<input type="checkbox"/>		None of the above

If you are certified by an organization as a small or minority business entity please attach a copy of your current certification and check here: _____

You agree (i) to promptly notify us in writing of any change to the matters contained herein, and (ii) that we may rely on your representations herein and on a facsimile copy of your signature as an original.

Dated this ____ day of _____ 200__.

By _____

Company Name _____

Signer Name _____

Signer Title _____