

Section 1 • Instructions to Man, Company, or Organization - Notice: see the Code of Federal Regulations [20CFR202.1]

Notice: Before completing this form, please review the information below carefully. Under the provisions of the Paperwork Reduction Act (44 U.S.C. 3501 et seq.) and DOJ FOIA and Privacy Act Regulations (28 C.F.R. Part 16 (2006)) Production or Disclosure of Material or Information, Employers are requested to make proper determination of their federal privilege status at [20CFR202.11] for certain People. If Section 2 below has been completed, the Undersigned on line 1a has requested that you provide the information required by this form to certify your Federal Employer Privilege Status. (The company or organization on the worker's behalf may also proactively initiate this determination.) Please complete and sign Section 3 below certifying the correct determination, positive or negative, of federal privilege status. Provide one signed copy of this form to the worker and retain one signed copy for the worker's permanent file. This Notice is a Presentment for Good faith in harmony with Fair Use of the Uniform Commercial Code [UCC]:

at [UCC §1-202. Notice: Knowledge]; All rights claimed and reserved at [UCC §1-308(a)] – Without Prejudice.

DEFINITION OF "FEDERAL PRIVILEGE WORKER": The term "federal privilege worker" includes (limited) an officer, employee, or elected or appointed official of the United States, a federal territory, or any political subdivision thereof, or the District of Columbia, or any agency or instrumentality of any one or more of the foregoing. The term "federal privilege worker" also includes an officer of a corporation.

DEFINITION OF "FEDERAL PRIVILEGE TRADE OR BUSINESS" (activity): The term "federal privilege trade or business" (activity) means any service, of whatever nature, performed (1) within the federal territory, or under a contract which is entered into within the federal territory, or if the employee is employed on an American vessel or American aircraft; or (2) if it is service which is designated or recognized under an agreement entered into under section 233 ("International Agreements") of the Social Security Act; or (3) as an employee of a person who is, or for an employer which is, (a) the United States or any instrumentality thereof, (b) an individual who is a resident of the federal territory, (c) a partnership or a trust, if two-thirds or more of the partners or trustees are residents of the federal territory, or (d) a corporation organized under the laws of the federal territory or any federal territory.

DEFINITION OF "FEDERAL TERRITORY": The term "federal territory" includes and shall be construed to include the District of Columbia, the Commonwealth of Puerto Rico, the Virgin Islands, Guam, and American Samoa. (The term "includes" shall not be deemed to exclude other things, districts, possessions, territories, etc., otherwise within the meaning of the term defined.). **Notice: Strictly Limited.**

Section 2 • Determination Request Completed and signed by man, male and female or completed by company or organization.

1a Worker's Name	1b Calendar Year(s) (Must be after 1954.)
1c Social Security Number (Either Social Security number or date of birth must be provided.)	1d Date of Birth
2a Company or Organization's Name	2b Employer Identification Number, if known
3a Company or Organization's Address	3b State Where Incorporated, if a corporation
4 Company or Organization's City, State, Zip Code	

I hereby request that the company or organization named on line 2a determine whether I constitute federal privilege worker status and whether my position constitutes or will constitute federal privilege activity for the period specified on line 1b.

5a Worker's Signature (Not required if Section 2 is completed by company or organization.) <u>My Liberty and Unalienable Rights and All Rights are Claimed and Reserved.</u> <u>Without Prejudice.</u>	5b Date
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Section 3 • Verification Completed and signed by an authorized agent for the company or organization. (Full explanation must accompany any positive certification of federal privilege status.)

6 The worker named on line 1a:

is a federal privilege worker [20CFR203.2]. Explain: _____

is not a federal privilege worker. (Notice: Default)

7 For the period specified on line 1b, as of today's date, the service performed for this company or organization by the worker named on line 1a:

is partially or completely a federal privilege activity [20CFR203.2]. Explain: _____

is not a federal privilege activity. (Notice: Default)

8 For the remainder of the current calendar year, the service anticipated to be performed for this company or organization by the worker named on line 1a:

is partially or completely a federal privilege activity [20CFR203.2]. Explain: _____

is not a federal privilege activity. (Notice: Default)

Important: Do not complete line 8 if the current calendar year is not within the period specified on line 1b.

Certification: I attest, under penalties of perjury, that to the best of my knowledge and belief this document is true, correct and complete.

9a Signature of Authorized Representative for the Company or Organization, or for man, male and female, in private capacity.	9b Date
10a Print Name	10b Title