TEXTRON Systems

SUPPLIER CLASSIFICATION FORM

Please complete, sign and return to Small Business Liaison Officer at sblo@textronsystems.com with "Supplier Classification Form" in subject line or fax to SBLO at 985-661-2288.

Company Name _____

Address _____ **City** _____ **State** _____ **Zip** _____

Telephone _____ **E-Mail Address** _____

Type of Business:

☐ **Manufacturer** ☐ **Distributor** ☐ **Sales Office** ☐ **Services**

Major Products or Services _____

Is this company a subsidiary of another company? ☐ **Yes** ☐ **No**

If yes, please provide the following information:

Parent Company _____

Address _____ **City** _____ **State** _____ **Zip** _____

What is the official U.S. Government classification of this company? Please check all that apply:

- ☐ Small Business
- ☐ Woman-Owned Business
- ☐ Large Business
- ☐ Company HUB Zone Certified
- ☐ Veteran-Owned Small Business
- ☐ Small Disadvantaged Business
- ☐ Foreign Business Intl Based or
- ☐ Foreign Business US Based
- ☐ Historically Black College or University
- ☐ Native American
- ☐ Services-Disabled Veteran-Owned Small Business

Please identify NAICS Codes: _____

(NAICS codes may be found at *www.census.gov)*

SUPPLIER DIVERSITY

Textron Systems Marine & Land Systems participates in the government's Small, Small Woman-Owned, Small Disadvantaged and Native American Business Programs. Please furnish the information requested on this form so that we may update your record in our vendor file. If you have any questions, please contact Roger Worrill at 985-661-3839.

NOTICE

Under 15 U.S.C. 645(d), any person who misrepresents a firm's status as a small business concern in order to obtain a contract to be awarded under the preference programs established pursuant to sections 8(a), 8(d), 9 or 15 of the Small Business Act or any other provision of Federal law that specifically references section 8(d) for a definition of program eligibility, shall: (1) be punished by imposition of a fine, imprisonment or both; (2) be subject to administrative remedies, including suspension and debarment; and (3) be ineligible for participation in programs conducted under the authority of the Act.

_____	_____	_____	_____
Name of Company Officer	**Signature**	**Title**	**Date**