

FOR CONTRACT YEAR ENDING: \_\_\_\_\_

The Contractor attests that all Contractor Social Networking Activities and materials are in compliance with the requirements of ACOM Policy 425.

\_\_\_\_\_  
SIGNATURE OF AUTHORIZED REPRESENTATIVE

\_\_\_\_\_  
PRINTED NAME OF AUTHORIZED REPRESENTATIVE

\_\_\_\_\_  
TITLE

\_\_\_\_\_  
CONTRACTOR

\_\_\_\_\_  
DATE

The Contractor shall submit a listing of all Contractor social networking applications with associated URLs utilizing the table below:

APPLICATION	URL