



U.S. Department of State

STATEMENT OF REGISTRATION(INSTRUCTIONS ON REVERSE SIDE)
(Attach additional sheet if necessary)OMB APPROVAL NO. 1405-0002
EXPIRATION DATE: 07/31/2005
ESTIMATED BURDEN: 2 Hours
(See page 2)

PM/DDTC DATE RECEIVED

NEW REGISTRANT CODE

1. REGISTRANT'S NAME AND ADDRESS:

2. CURRENT REGISTRANT CODE:

3.

\$ _____ ENCLOSED FOR 1 2 3 4 (CIRCLE ONE) YEARS REGISTRATION.

4. REGISTRANT IS:

☐ INDIVIDUAL ☐ PARTNERSHIP ☐ COMPANY ☐ CORPORATION

5. REGISTRANT IS:

☐ MANUFACTURER AND/OR ☐ EXPORTER OF MUNITIONS LIST
☐ EXPORTER OF DEFENSE SERVICE ☐ BROKER

6. INCORPORATION OR COMMENCEMENT OF BUSINESS: DATE (mm-dd-yyyy) _____

IN _____
City, Country, and State

TELEPHONE _____

7. DIRECTORS, OFFICERS, PARTNERS, OWNERS:

NAME (Last, First, Middle)

POSITION

DATE (mm-dd-yyyy) and PLACE
OF BIRTHSOCIAL SECURITY
NUMBER

HOME ADDRESS

CITIZENSHIP

8. U.S. MUNITIONS LIST ARTICLES MANUFACTURED AND/OR EXPORTED, OR DEFENSE SERVICES PROVIDED:

CATEGORY

COMMODITY/SERVICE

PURCHASING U.S. GOVERNMENT AGENCY (IF ANY)

9. NAMES AND ADDRESSES OF REGISTRANT'S WHOLLY
AND PARTIALLY-OWNED U.S. SUBSIDIARIES:☐ YES (SPECIFY) ☐ NO10. NAMES AND ADDRESSES OF REGISTRANT'S WHOLLY
AND PARTIALLY-OWNED FOREIGN SUBSIDIARIES☐ YES (SPECIFY) ☐ NO11. NAME, ADDRESS AND TELEPHONE NUMBERS OF REGISTRANT'S PARENT COMPANY
(IF ANY)12. IS THE REGISTRANT OWNED ☐ AND/OR CONTROLLED ☐
BY FOREIGN PERSONS (See § 122.2(c) of the ITAR) ☐ YES (SPECIFY) ☐ NO13. DOES REGISTRANT SUBMIT FEDERAL INCOME TAX FORMS SEPARATELY FROM COMPANY IN BLOCK 11? ☐ YES ☐ NO

14. REGISTRANT'S STATEMENT:

UNDER PENALTY ACCORDING TO FEDERAL LAW (See § 22 CFR 127; 22 USC 2778; 18 USC 1001)

I, _____ WARRANT THE TRUTH OF ALL STATEMENTS MADE HEREIN
TYPE FULL NAME

SIGNATURE

DATE (mm-dd-yyyy)

TITLE POSITION