**ADMINISTRATIVE PROTECTIVE ORDER ACKNOWLEDGMENT FOR CLERICAL PERSONNEL**

**Inv. No. TA-**

 **(Name of Investigation)**

We, the undersigned, are persons described in paragraph B(1)(iv) of the Administrative Protective Order (APO) issued in the subject investigation. We hereby agree to be bound by the provisions of the APO. We acknowledge that we may be subject to the sanctions described in paragraph D of the APO. The authorized applicant exercising direction and control over us in the investigation has also signed this acknowledgement to indicate that the applicant is responsible for our compliance with the APO.

We declare under penalty of perjury that the foregoing is true and correct. Executed on the dates indicated.

(Name--Please Print) (Title) (Signature) (Date)

(Date Access Terminated)(Authorized Applicants Initials)

(Name--Please Print) (Title) (Signature) (Date)

(Date Access Terminated)(Authorized Applicants Initials)

(Name--Please Print) (Title) (Signature) (Date)

(Date Access Terminated)(Authorized Applicants Initials)

(Name--Please Print) (Title) (Signature) (Date)

(Date Access Terminated)(Authorized Applicants Initials)

**PERSON EXERCISING DIRECTION AND CONTROL**

 (Print or type full name)

 (Signature)[[1]](#footnote-1)

 (Title)

1. NOTICE: 18 U.S.C. § 1001 and other laws of the United States provide severe penalties for the submission of false, fictitious, or fraudulent statements on this form. Similar provisions may also be applicable under Canadian or Mexican law. [↑](#footnote-ref-1)