

REPORT OF CONTRACT PERFORMANCE OUTSIDE THE UNITED STATES

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 OMB approval expires
 XXXXXXXX

The public reporting burden for this collection of information is estimated to average 20 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to the Department of Defense, Washington Headquarters Services, at whs.mc-alex.esd.mbx.dd-dod-informationcollections@mail.mil. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number.

PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE ABOVE ORGANIZATION.

**RETURN COMPLETED FORM TO: DEPUTY DIRECTOR OF DEFENSE PROCUREMENT (FOREIGN CONTRACTING), OUSD(A&T)DP(FC),
 WASHINGTON, DC 20301-3060**

1.a. PRIME CONTRACT NUMBER *(Use solicitation number when report is submitted with offer)*

1.b. PURCHASE ORDER NUMBER *(If applicable)*

2. PROGRAM IDENTIFICATION *(e.g., F-16 aircraft, F-100 engine, AN/APN-59 radar, or type of services) (Please avoid use of acronyms.)*

3. NAME AND DIVISION OF PRIME CONTRACTOR

4. ADDRESS OF PRIME CONTRACTOR *(Street, City, State, and 9-digit ZIP Code)*

5. NAME OF SUBCONTRACTOR OR FOREIGN DIVISION OF PRIME CONTRACTOR *(If subcontractor, identify whether first- or second-tier)*

DRAFT

FIRST-TIER SUBCONTRACTOR **SECOND-TIER SUBCONTRACTOR**

6. ADDRESS OF SUBCONTRACTOR OR FOREIGN DIVISION OF PRIME CONTRACTOR *(Street, City, State, 9-digit ZIP Code, and Country)*

7. VALUE *(in dollars)* **OF EFFORT PERFORMED OUTSIDE THE UNITED STATES FOR THIS ACTION ONLY. DO NOT INCLUDE AMOUNTS PREVIOUSLY REPORTED.**

8. COUNTRY OF ORIGIN *(Enter city and country of actual producer of supplies or firm providing services)*

9. DESCRIPTION OF SUPPLIES OR SERVICES OBTAINED OUTSIDE THE UNITED STATES *(e.g., vertical stabilizer, F-15; Bomb Nav System, FB-111; or repair of F-16 wings) (Please avoid use of acronyms.)*

10. NAME OF COMPANY SUBMITTING REPORT *(Prime contractor for reports on first-tier subcontracts or first-tier subcontractor for reports on second-tier subcontracts)*

11. NAME OF SUBMITTER *(LAST, First, Middle Initial)*

12. TELEPHONE NUMBER *(Include Area Code)*

13. SIGNATURE

14. DATE *(YYYYMMDD)*