U.S. Department of the Interior DI-3680 Donor Certification Form 11/30/2018

OMB Control No. 1090-0009 expires:

Thank you for your interest in making a donation to the Department of the Interior or one of its bureaus (Bureau of Land Management, Bureau of Reclamation, Bureau of Indian Affairs, Bureau of Ocean Energy Management, Bureau of Safety and Environmental Enforcement, National Park Service, Office of Surface Mining, U.S. Fish and Wildlife Service, and U.S. Geological Survey, or other Departmental bureau). It is Interior's policy to ensure that in accepting donations, the Department maintains its integrity and impartiality, and the confidence of the public. The following certification helps the Department and you, the potential donor, to identify areas of concern that might be raised by a donation. An affirmative answer to any of the statements below does not mean a donation will be declined, but may initiate further review.

I am executing this Donor C	ertification Form as	_ an individual or _	_X	_ on behalf of the following
organization or person:	Gill Foundation			

To the best of my knowledge and belief, I certify that: 1. I _____ am / __X ___ am not involved in litigation or other controversy with the Department or its bureaus.

2. I____am / X__am not seeking or otherwise engaged in any type of financial or business relationship with the Department, for example, a contract, permit, lease, grant, or cooperative agreement.

3. I_have / X_have not been debarred, suspended, proposed for debarment, excluded or disqualified under the nonprocurement common rule, or otherwise declared ineligible from doing business with any Federal government agency.

4. This donation ______ is / _____ is not expected to be involved with marketing or advertising.

5. I____am / ___X am not seeking to attach condition(s) to this donation.

6. This donation ______ is / _X ____ is not part of a series of donations to the Department or its bureaus.

For any affirmative answers above, please attach explanations. Please also identify any other circumstances not addressed in the above questions that may affect the Department's decision to accept your donation.

With my signature I hereby certify the above statements are accurate and attest that I am not aware of other issues regarding this donation that may be of concern to the Department. I also certify that this donation is not intended to influence any decision or action by the Department or to obtain any special treatment from the Department. I understand that the Department's acceptance of this donation does not constitute endorsement by the Department of me or my products or services.

M	Gautan	n Raghavan	Oct 6, 2016		
Signature	Printed Name		Date		
Gill Foundation			gr@gillfoundation.org		
Organization			E-mail address		
Denver	СО	80205	_202-641-1273		
City	State	— <u>Z</u> ip —	Daytime or Work Phone		

NOTICES

PAPERWORK REDUCTION ACT NOTICE: The Paperwork Reduction Act of 1995 requires us to inform you that: the Department of the Interior, or one of its bureaus or offices, collects the information requested on this form pursuant to a proposal of a donor to proffer a gift to the Department or one of its bureaus or offices valued at least \$25,000. The Department, bureau or office will evaluate the certification regarding your proposed gift to support its policy of ensuring integrity and impartiality in the fulfillment of its missions. The authority for collecting this information may be found at 9 Stat. at L. 395, Ch. 108, at 18 U.S.C. § 201, and at 374 Departmental Manual Chapter 6. Submission of the form is completely voluntary, but not providing it may delay consideration of your proposed gift to the Department as it will make it more difficult for the Department to determine the context of the gift. Submitting the form does not entitle the respondent to any benefit. This Information Collection has been approved by the Office of Management and Budget (OMB), and the currently valid OMB Control Number and Expiration Date appears on the upper right corner of Page 1 of the Form. No Federal agency may request or sponsor, and you are not required to respond to, a request for information which does not contain a currently valid OMB Control Number.

BURDEN HOURS STATEMENT: The public burden for this form is estimated at 20 minutes per response including the time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. Direct comments regarding the burden estimate or any other aspect of this form to: U.S. Department of the Interior, Office of the Secretary, Office of Financial Management, 1849 C St. NW., MS 2557 MIB, Washington, DC 20240. Note – comments, names and addresses of commentators are available for public review during regular business hours. If you wish us to withhold this information, you must state this prominently at the beginning of your comment. While you may ask us in your comment to withhold PII from public view, we cannot guarantee that we will be able to do so.

PRIVACY ACT STATEMENT: The collection of this information is authorized by 43 U.S.C. 1737, 16 U.S.C. 6, and 43 U.S.C. 36c. The principle purpose of this information collection is to ensure the Department maintains its integrity and impartiality, and the confidence of the public by providing donors the opportunity to certify certain basic information related to gifts or donations. The Department will use the information to facilitate the evaluation, acceptance, and solicitation of donations by individuals and organizations. This information may be shared with other agencies or organizations for the purpose of verifying, authorizing, or processing gifts or donations, or as required by law. Providing the requested information is voluntary. However, not providing it may delay consideration of proposed gifts to the Department, and may make it more difficult for the Department to determine the context of the gift. Submitting the form does not entitle the respondent to any benefit.

U.S. Department of the Interior Donor Certification Form

DI-3680 OMB Control No. 1090-0009 expires: 09/30/2015

Thank you for your interest in making a donation to the Department of the Interior or one of its bureaus (Bureau of Land Management, Bureau of Reclamation, Bureau of Indian Affairs, Bureau of Ocean Energy Management, Bureau of Safety and Environmental Enforcement, National Park Service, Office of Surface Mining, U.S. Fish and Wildlife Service, and U.S. Geological Survey, or other Departmental bureau). It is Interior's policy to ensure that in accepting donations, the Department maintains its integrity and impartiality, and the confidence of the public. The following certification helps the Department and you, the potential donor, to identify areas of concern that might be raised by a donation. An affirmative answer to any of the statements below does not mean a donation will be declined, but may initiate further review.

I am executing this Donor Certification Form as $___$ an individual or $__X$ on behalf of the following organization or person: National Congress of American Indians

To the best of my knowledge and belief, I certify that: 1. I _____am / ____am not involved in litigation or other controversy with the Department or its bureaus.

2. I____am / $\mathbf{\times}$ am not seeking or otherwise engaged in any type of financial or business relationship with the Department, for example, a contract, permit, lease, grant, or cooperative agreement.

3. I_have / $\underline{\times}$ have not been debarred, suspended, proposed for debarment, excluded or disqualified under the nonprocurement common rule, or otherwise declared ineligible from doing business with any Federal government agency.

4. This donation ______ is / X is not expected to be involved with marketing or advertising.

5. I____am / X__am not seeking to attach condition(s) to this donation.

6. This donation ______ is / _____ is not part of a series of donations to the Department or its bureaus.

For any affirmative answers above, please attach explanations. Please also identify any other circumstances not addressed in the above questions that may affect the Department's decision to accept your donation.

With my signature I hereby certify the above statements are accurate and attest that I am not aware of other issues regarding this donation that may be of concern to the Department. I also certify that this donation is not intended to influence any decision or action by the Department or to obtain any special treatment from the Department. I understand that the Department's acceptance of this donation does not constitute endorsement by the Department of me or my products or services.

CapulationJacqueline Pata11-18-14SignaturePrinted NameDateNational Congress of American Indiansipata @ ncai.orgOrganizationDC20005WashingtonStateZipDefinitionDC20005DistanceDateDateDCStateZipDateDateDateDC<t

Thank you for your interest in making a donation to the Department of the Interior or one of its bureaus (Bureau of Land Management, Bureau of Reclamation, Bureau of Indian Affairs, Bureau of Ocean Energy Management, Bureau of Safety and Environmental Enforcement, National Park Service, Office of Surface Mining, U.S. Fish and Wildlife Service, and U.S. Geological Survey, or other Departmental bureau). It is Interior's policy to ensure that in accepting donations, the Department maintains its integrity and impartiality, and the confidence of the public. The following certification helps the Department and you, the potential donor, to identify areas of concern that might be raised by a donation. An affirmative answer to any of the statements below does not mean a donation will be declined, but may initiate further review.

I am executing this Donor Certification Form as _____ an individual or __X__ on behalf of the following organization or person:_National Fish and Wildlife Foundation_____.

To the best of my knowledge and belief, I certify that:

1. I _____am / __X__am not involved in litigation or other controversy with the Department or its bureaus.

2. I <u>X</u> am / <u>am not seeking or otherwise engaged in any type of financial or business relationship with the Department, for example, a contract, permit, lease, grant, or cooperative agreement.</u>

3. I have / X have not been debarred, suspended, proposed for debarment, excluded or disqualified under the nonprocurement common rule, or otherwise declared ineligible from doing business with any Federal government agency.

4. This donation ______ is / _X ____ is not expected to be involved with marketing or advertising.

5. I____am / X__am not seeking to attach condition(s) to this donation.

6. This donation _____is / ___X is not part of a series of donations to the Department or its bureaus.

For any affirmative answers above, please attach explanations. Please also identify any other circumstances not addressed in the above questions that may affect the Department's decision to accept your donation.

With my signature I hereby certify the above statements are accurate and attest that I am not aware of other issues regarding this donation that may be of concern to the Department. I also certify that this donation is not intended to influence any decision or action by the Department or to obtain any special treatment from the Department. I understand that the Department's acceptance of this donation does not constitute endorsement by the Department of me or my products or services.

XO Signature (bo.falayi@nfwf.org Fish and Wildlife Found UTIONAL Organization E-mail address Washinaton 202-257 City Daytime or Work Phone

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Thank you for your interest in making a donation to the Department of the Interior or one of its bureaus (Bureau of Land Management, Bureau of Reclamation, Bureau of Indian Affairs, Bureau of Ocean Energy Management, Bureau of Safety and Environmental Enforcement, National Park Service, Office of Surface Mining, U.S. Fish and Wildlife Service, and U.S. Geological Survey, or other Departmental bureau). It is Interior's policy to ensure that in accepting donations, the Department maintains its integrity and impartiality, and the confidence of the public. The following certification helps the Department and you, the potential donor, to identify areas of concern that might be raised by a donation. An affirmative answer to any of the statements below does not mean a donation will be declined, but may initiate further review.

I am executing this Donor Certification Form as \underline{X} an individual or $\underline{}$ on behalf of the following organization or person:

To the best of my knowledge and belief, I certify that: 1. I _____am / _____am not involved in litigation or other controversy with the Department or its bureaus.

2. I____am / _____am not seeking or otherwise engaged in any type of financial or business relationship with the Department, for example, a contract, permit, lease, grant, or cooperative agreement.

3. I____have / X have not been debarred, suspended, proposed for debarment, excluded or disqualified under the nonprocurement common rule, or otherwise declared ineligible from doing business with any Federal government agency.

4. This donation ______ is / ______ is not expected to be involved with marketing or advertising.

5. I____am / X_am not seeking to attach condition(s) to this donation.

6. This donation ______ is / χ is not part of a series of donations to the Department or its bureaus.

For any affirmative answers above, please attach explanations. Please also identify any other circumstances not addressed in the above questions that may affect the Department's decision to accept your donation.

With my signature I hereby certify the above statements are accurate and attest that I am not aware of other issues regarding this donation that may be of concern to the Department. I also certify that this donation is not intended to influence any decision or action by the Department or to obtain any special treatment from the Department. I understand that the Department's acceptance of this donation does not constitute endorsement by the Department of me or my products or services.

Signature	Sally S Printed Nat	Fausell me	<u>9/29/16</u> Date Sally@ignselltech.net
Organization			<u>E-mail address</u>
City	State	Zip	Daytime or Work Phone

U.S. Department of the Interior Donor Certification Form DI-3680 OMB Control No. 1090-0009 expires: 09/30/2015

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I am executing this Donor	Certification Form	as an	individual or	Хс	on behalf of the followin	g
0			the trans	an h	healing	-
organization or person:	Celleo Port	W SUP	ala veni	<u>011 U</u>	1172435	

To the best of my knowledge and belief, I certify that:

1. I _____am / ____am not involved in litigation or other controversy with the Department or its bureaus.

2. I $\underline{\times}$ am / _____ am not seeking or otherwise engaged in any type of financial or business relationship with the Department, for example, a contract, permit, lease, grant, or cooperative agreement.

3.I ____have / ____have not been debarred, suspended, proposed for debarment, excluded or disqualified under the nonprocurement common rule, or otherwise declared ineligible from doing business with any Federal government agency.

4. This donation X_{is} / _____ is not expected to be involved with marketing or advertising.

5. I $am / \frac{1}{2}$ am not seeking to attach condition(s) to this donation.

6. This donation ______ is $/ \times$ _____ is not part of a series of donations to the Department or its bureaus.

For any affirmative answers above, please attach explanations. Please also identify any other circumstances not addressed in the above questions that may affect the Department's decision to accept your donation.

With my signature I hereby certify the above statements are accurate and attest that I am not aware of other issues regarding this donation that may be of concern to the Department. I also certify that this donation is not intended to influence any decision or action by the Department or to obtain any special treatment from the Department. I understand that the Department's acceptance of this donation does not constitute endorsement

by the Department of me or my		cutive Director Contracting	July 23, 2014
Signature Cellco Partnersh	Printed Nai	Date food loccisano evzw. com	
Organization Laurel	MD	20723	E-mail address 240-568-1411
City	State	Zip	Daytime or Work Phone

NOTICES

PRINCIPAL PURPOSE: This information is collected to support the Department's policy that in accepting donations, the Department maintains its integrity and impartiality, and the confidence of the public by providing the donor the opportunity to certify certain basic information related to the gift. This information will only be used in accordance with 374 Departmental Manual Chapter 6 by Department of the Interior officials.

EFFECT OF NOT PROVIDING THIS FORM: Submission of the form is completely voluntary, but not providing it may delay consideration of your proposed gift to the Department as it will make it more difficult for the Department to determine the context of the gift. Submitting the form does not entitle the respondent to any benefit.

AUTHORITY: The authority for collecting this information may be found at 9 Stat. at L. 395, Ch. 108, at 18 U.S.C. § 201, and at 374 Departmental Manual Chapter 6.

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ATTACHMENT TO DONOR CERTIFICATION FORM DI-3680 SUBMITTED BY CELLCO PARTNERSHIP D/B/A VERIZON WIRELESS TO DEPARTMENT OF INTERIOR

Question 2: Verizon Wireless has active contracts with the Department of Interior and its bureaus.

Question 4: Verizon Wireless does not intend to use this donation in its commercial advertising relating to specific products and services. However, Verizon will likely refer to the donation in communications relating to its corporate citizenship efforts.