### APPENDIX A TO PART 201—SUPPLIER’S CERTIFICATE AND AGREEMENT WITH THE AGENCY FOR INTERNATIONAL DEVELOPMENT (AID 282)

#### INVOICE-AND-CONTRACT ABSTRACT

1. **Commodity**
   - Supplier's Name and Address
2. **For A.I.D. Use**
3. **A.I.D. Implementation Number**

4. Importer’s Name and Address

5. **Vessel**
6. **Flag**
7. **Port of Loading**

### COMMODITY INFORMATION

- Description of Commodity and Schedule B No.
- Gross Weight
- Measurement

### INVOICE INFORMATION

- Number
- Date
- Date of Shipment
- Total Amount
- Source/Origin (Country)

### SUPPLIER INFORMATION

- Supplier Name
- Address
- Description of Goods
- Amount Paid or Due

### TRANSPORTATION INFORMATION

- Vehicle Type
- Vehicle Number
- Rate
- Tariff
-TOTAL FREIGHT CHARGES

### SHIPMENT INFORMATION

- Number
- Rate
- TOTAL FREIGHT CHARGES

### ADDITIONAL INFORMATION AND REMARKS

- Certification
- Other Information
- Name and Address of Company

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SUPPLIER'S CERTIFICATE AND AGREEMENT WITH THE AGENCY FOR INTERNATIONAL DEVELOPMENT

The supplier hereby acknowledges that the sum claimed in the corresponding invoice to be due and owing under the terms of the purchase order for which this Certificate is issued is just and true, and to the best of his knowledge and belief is correct in all respects and is due from the Government of the United States of America to the supplier under the terms of the purchase order. The supplier further certifies that he has inspected the warranted goods and services under the purchase order and has determined, in accordance with the applicable laws and regulations, that the goods and services correspond to the description and quantity therein; that the delivery of said goods and services has been completed and accepted by the Government; that the supplier has been paid the full amount due under the purchase order; that the supplier has performed all contract or other obligations under the purchase order; and that the supplier has delivered all goods and services to the Government in good order and condition, for the purposes for which they were purchased.

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22 CFR Ch. II (4–1–10 Edition)
INSTRUCTIONS FOR COMPLETING FORM AID 282

PAPERVERKEDUCTION ACT NOTICE. Information furnished to be used to verify compliance with legal requirements, as a basis for reasons in the event of any other action, and to enable participation in, or to facilitate the award of, various Federal assistance programs. The auditor or other person to whom this information is disclosed may use it, subject to any restrictions provided by law. Submittal of this information has been determined to be necessary to receive payment from A.I.D. Funds pursuant to 22 U.S.C. 2350.

Prior to reporting herein, this collection of information is estimated to average three 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: 

Agency For International Development
Office of Procurement Policy, Planning & Evaluation, MS 199-D
Washington, D.C. 20523

EXECUTION OF FORM: This form is designed for use with the U.S. Standard Form for International Trade. An original and one (1) copy of this form, completed in full and signed, shall be submitted to the Agency for International Development, Office of Procurement Policy, Planning & Evaluation, MS 199-D, Washington, D.C. 20523, at the time such contract is entered into.

INSTRUCTIONS FOR COMPLETING ENTRIES ON INVOICE- AND CONTRACT ABSTRACT

GENERAL INSTRUCTIONS

Except as provided in the instructions for specific blocks, supply exact answers to all blocks or enter the letter "N/A" (Not Applicable), as follows:

Commodity_Supplier – Complete all blocks except 12 and 13; however, if the commodity supplier has paid for the transportation expenses, enter in block 12. If the commodity is purchased from a foreign country and if such country is not a United States Government recognize or is otherwise not recognized by the commodity supplier, block 11 to be completed. Refer to the specific blocks in block 1 in a U.S. address, as follows:

Transportation Supplier ( Carrier) – Complete blocks 1 through 8 as well as 13, 14, and 16.

Insurance Supplier (Insurer) – Complete blocks 1 through 8 as well as 14, 15, and 16.

INSTRUCTIONS FOR INDIVIDUAL BLOCKS

Block 1: Enter the commodity supplier’s name and address.
INSTRUCTIONS FOR COMPLETING FORM AID 282

"Economically disadvantaged individuals" means socially disadvantaged individuals whose ability to compete in the free enterprise system is impaired due to disadvantages of such minority group status are members of traditional black Americans, Hispanic Amerindians, Native Americans, or subgroups of these groups, are socially and economically disadvantaged.

"Asian-American" means United States citizens whose origins are in India, Pakistan, Bangladesh, Sri Lanka,时辰, or Nepal.

"Arab Pacific Americans" means United States citizens whose origins are in Arabia, China, or Philippines, Vietnam, Korea, Samoa, Guam, the U.S. Trust Territory of the Pacific Islands (Republic of Palau), the Northern Marianas Islands, Laos, Kampuchea (Cambodia), Taiwan, Burma, Thailand, Malaysia, Indonesia, Singapore, Brunei, and Brunei, Republic of the Marshall Islands, or the Federated States of Micronesia.

"Native Americans" means American Indians, Eskimos, Alaskan, and Native Hawaiian.

d. If the supplier is a socially and economically disadvantaged concern, enter the best estimate of the percentage of the total invoice amount paid or to be paid to subcontractors or suppliers of components who are socially and economically disadvantaged subcontractors.

e. Indicate whether the supplier is a women-owned business. "Women-owned businesses" means a business which is at least 51 percent owned by one or more women who are United States citizens and who also control and operate the business.

f. If the supplier is not a women-owned business, enter the best estimate of the percentage of the total invoice amount paid or to be paid to subcontractors or suppliers of components who are women-owned businesses.

BLOCK 12: INSURANCE INFORMATION
COMPLETE BLOCK 12 only if the insurance premiums exceed $10.

a. Enter the insured value of the shipment.

b. Enter the type of coverage and insurance rate.

"Others" is checked, submit below or in Block 13.

BLOCK 13: TRANSPORTATION INFORMATION

a. Check one type.

b. Enter Bill of Lading or air waybill number.

c. Enter Bill of Lading or air waybill date.

d. Enter the freight rate, other freight charges and the total dollar value or freight charges after discount.

BLOCK 14: INFORMATION AS TO COMMISSIONS, CREDITS, ALLOWANCES, SIMILAR PAYMENTS AND RESIDUE PAYMENTS

Enter information on (x) all commissions and other payments, credits, allowances or reimbursements or the benefit of the supplier, (y) the amount, or the supplier's agent (z) the agent's name and address.

If there is insufficient space to furnish the required information in block 14, continue in block 12 or enter "Continued" or "See Attached" in block 14, and attach signatures sheet to the form. If no commission or other payments, credits, allowances, benefits, or other payments are involved, enter "NONE" in block 14.

BLOCK 16: If the supplier's Certificate is completed by the carrier or vendor, check the appropriate box and print or type carrier's or vendor's name and address.

DO NOT INCLUDE THE INSTRUCTIONS ON PAGES 3 AND 4 WITH THE SUBMISSION OF THE COMPLETED FORM.