

ATTESTATION

**Randolph-Sheppard Financial Relief and Restoration Payments
(FRRP) Appropriation ASSURANCES and USE of FRRP FUNDS**

I, _____ am a Randolph-Sheppard vendor in the Virginia Enterprises for the Blind Program (VEB).

I incurred the following calculated financial loss from 2019 to 2020 calendar years:

2019 net facility profit: _____

2020 net facility profit: _____

2020 fair minimum: _____

Lost net profit in the amount of \$_____

This is, supported by the VEB profit and loss reports submitted by me, and compares net profit for my business in calendar year 2019 and 2020 with the addition of fair minimum payments.

My signature below indicates my confirmation of this loss and that it was not, otherwise compensated.

I understand I am solely responsible for this declaration and that I could be subject to monetary penalties and or disciplinary action, should my attestation, be found to be untrue.

For this attestation, “otherwise compensated” is defined as only revenues reported on my VEB monthly ledgers. PPP and SBA loans, vacation pay, unemployment, and SSDI are not considered “otherwise compensated” as these items are either not reported on my VEB monthly ledgers to the program or they are required to be repaid.

VEB Vendor Signature

(Date)