CLASSIFICATION: (When filled in)

| NOT RELEASABLE TO FOREIGN GOVERNMENTS, NATIONALS OR THEIR REPRESENTATIVES   |  |  |  |  |  |
|---|--|--|--|--|--|
| FOREIGN DISCLOSURE PROCUREMENT DECISION WORKSHEET   |  |  |  |  |  |
| CASE IDENTIFICATION   |  |  |  |  |  |
| 1. FDO CASE NUMBER 2. SHORT TITLE   |  |  |  |  |  |
| 3. POTENTIAL FOREIGN PARTICIPANTS   |  |  |  |  |  |
| 4. CITE PROGRAM ELEMENT/TASK/WORK UNIT AND FUNDING CATEGORY (i.e., 6.1; 6.2; 6.3; etc.)   |  |  |  |  |  |
| SECURITY CLASSIFICATION   |  |  |  |  |  |
| 5. HIGHEST SECURITY CLASSIFICATION OF PROGRAM/CONTRACT  |  |  |  |  |  |
| 6. HIGHEST SECURITY CLASSIFICATION OF DATA/EQUIPMENT/INFORMATION TO BE RELEASED   |  |  |  |  |  |
| 7. ANTICIPATED SECURITY CLASSIFICATION OF DATA/EQUIPMENT/INFORMATION TO BE DEVELOPED, GENERATED, OR PRODUCED UNDER PROGRAM/CONTRACT   |  |  |  |  |  |
| DESCRIPTION   |  |  |  |  |  |
| 8. LIST ALL TECHNOLOGIES, DATA AND EQUIPMENT TO BE DISCLOSED TO A FOREIGN PARTICIPANT, AT EACH PHASE IN THE CONTRACT.  8. LIST ALL TECHNOLOGIES, DATA AND EQUIPMENT TO BE DISCLOSED TO A FOREIGN PARTICIPANT, AT EACH PHASE IN THE CONTRACT.                            |  |  |  |  |  |
| 9. DESCRIBE SENSITIVITY, IMPORTANCE, OR CRITICALITY OF ALL TECHNOLOGIES/DATA/EQUIPMENT LISTED ABOVE AS REQUIRED FOR DISCLOSURE.   |  |  |  |  |  |
| 10. DOES ANY OF THE INFORMATION BEAR A CAVEAT LIMITING DISTRIBUTION (NOFORN (Not Releasable to Foreign Nationals), LIMDIS (Limited Dissemination), ORCON (Originator Controlled), RD (Restricted Data) or FRD (Formerly Restricted Data), etc.)? IF YES, SPECIFY.       |  |  |  |  |  |
| 11. IF ANY OF THE INFORMATION OR EQUIPMENT TO BE DISCLOSED IS UNDER THE COGNIZANCE OR JOINT COGNIZANCE OF ANOTHER US GOVERNMENTAGENCY (Army, Navy, ARPA, NASA, etc.) IDENTIFY THE INFORMATION AND AGENCY. PROVIDE STATUS OF RELEASE AGREEMENT FOR EACH INVOLVED AGENCY. |  |  |  |  |  |
| 12. IS ANY OF THE INFORMATION PROPRIETARY TO A CONTRACTOR OR PRIVATE INDIVIDUAL? IS YES, SPECIFY.   |  |  |  |  |  |
| NOT RELEASABLE TO FOREIGN GOVERNMENTS, NATIONALS OR THEIR REPRESENTATIVES  AFMC FORM 191 20230823 (Tochnical Fix 1) PREVIOUS EDITION IS OBSOLETE Page 1 of 2  |  |  |  |  |  |

AFMC FORM 191, 20230823 (Technical Fix 1)
Prescribed by: DAFMAN16-201\_AFMCSUP

| NOT RELEASA  | BLE TO FOREIGN GOVERNMENTS, I   | NATIONALS OR THEIR | REPRESENTATIVES         |                         |  |
|--|---------------------------------|--------------------|-------------------------|-------------------------|--|
| 13. PLEASE PROVIDE NAMES, OFFICE SYMBOL CASE.                                      | S, AND PHONE NUMBERS OF OTH     | ER ORGANIZATIONS ( | OR INDIVIDUALS THAT MAY | NEED TO EVALUATE THIS   |  |
| 14. PROVIDE ANY ADDITIONAL COMMENTS YOU  | U FEEL ARE APPLICABLE TO THIS I | DISCLOSURE ACTION  | (i.e. FMS Case ID)      |                         |  |
|  |                                 |                    | ,                       |                         |  |
|  | RELEASE RECON                   | MENDATION          |                         |                         |  |
| 15a. REQUESTER   | 15b. SIGNATURE                  |                    | 15c. OFFICE SYMBOL      | 15d. PHONE              |  |
| RECOMMEND FOREIGN PARTICIPATION BE AUTHORIZED (provide justification below)        |                                 |                    |                         |                         |  |
| DO NOT RECOMMEND FOREIGN PARTICIPATION BE AUTHORIZED (provide justification below) |                                 |                    |                         |                         |  |
| 16. JUSTIFICATION/ADDITIONAL INFORMATION   |                                 |                    |                         |                         |  |
| FDO USE ONLY   |                                 |                    |                         |                         |  |
| APPROVED   |                                 |                    |                         |                         |  |
| DENIED   |                                 |                    |                         |                         |  |
| FORWARDED TO HQ AFMC   |                                 |                    |                         |                         |  |
| FDO APPROVAL NOT REQUIRED  |                                 |                    |                         |                         |  |
| 17. IDENTIFY THE DDL(S) THAT AUTHORIZES T  | HIS RELEASE. IS THE RELEASE DE  | CISION BASED UPON  | N REVIEW OF ENTIRE CON  | TENT OF APPLICABLE DDL? |  |
| 18. RECOMMENDATION/JUSTIFICATION   |                                 |                    |                         |                         |  |
|  |                                 |                    |                         |                         |  |
|  |                                 |                    |                         |                         |  |
|  |                                 |                    |                         |                         |  |
|  |                                 |                    |                         |                         |  |
|  |                                 |                    |                         |                         |  |
|  |                                 |                    |                         |                         |  |
|  |                                 |                    |                         |                         |  |
|  |                                 |                    |                         |                         |  |
|  |                                 |                    |                         |                         |  |
|  |                                 |                    |                         |                         |  |
|  |                                 |                    |                         |                         |  |
|  |                                 |                    |                         |                         |  |
| 19a. NAME  |                                 | 19b. SIGNATURE     |                         |                         |  |