

DEPARTMENT OF HOMELAND SECURITY
U.S. Customs and Border Protection

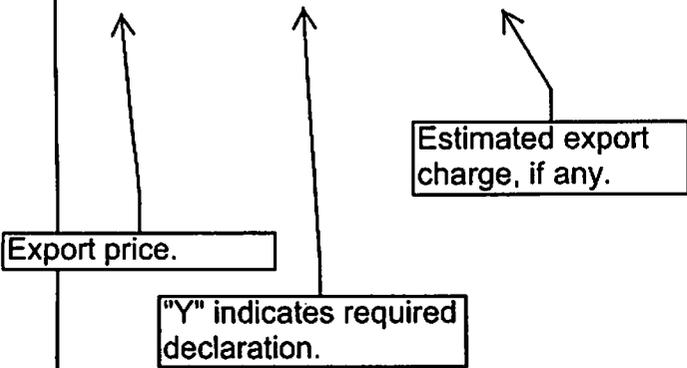
ENTRY SUMMARY

| | | | | | | | |
|---|--|--------------------------------|--|-----------------------|--|----------------------------|--|
| 8. Importing Carrier | | 9. Mode of Transport | | 10. Country of Origin | | 11. Import Date | |
| 12. B/L or AWB No. | | 13. Manufacturer ID | | 14. Exporting Country | | 15. Export Date | |
| 16. I.T. No. | | 17. I.T. Date | | 18. Missing Docs | | 19. Foreign Port of Lading | |
| 20. U.S. Port of Unlading | | 21. Location of Goods/G.O. No. | | 22. Consignee No. | | 24. Reference No. | |
| 25. Ultimate Consignee Name and Address and Address | | | | | | | |

SAMPLE

| | | | | | | | | | | | |
|------|--|--|------|--|--|-------|--|--|-----|--|--|
| City | | | City | | | State | | | Zip | | |
|------|--|--|------|--|--|-------|--|--|-----|--|--|

| 27. Line No. | 29. HTSUS No. / ADA/CVD No. | | 30. Grossweight / Manifest Qty. | | 31. Net Quantity in HTSUS Units | 32. A. Entered Value B. CHGS C. Relationship | 33. A. HTSUS Rate B. ADA/CVD Rate C. IRC Rate D. Visa No. | | 34. Duty and I.R. Tax | |
|--------------|-----------------------------|-------|---------------------------------|--|---------------------------------|--|--|--|-----------------------|--|
| | Dollars | Cents | | | | | | | | |
| 01 | 4407.10.00.00 001563214 | | Y00000001288 | | | \$13,295.16 | 0.00% | | 0.00% | |



| | | | | | | | |
|--|--|-------------------------|--|---------------------|--|----------------------|--|
| Other Fee Summary for Block 39 | | 35. Total Entered Value | | CBP USE ONLY | | TOTALS | |
| | | \$ | | A. LIQ CODE | | B. Ascertained Duty | |
| | | Total Other Fees | | REASON CODE | | C. Ascertained Tax | |
| | | \$ | | | | D. Ascertained Other | |
| 36. DECLARATION OF IMPORTER OF RECORD (OWNER OR PURCHASER) OR AUTHORIZED AGENT | | | | | | E. Ascertained Total | |
| I declare that I am the <input type="checkbox"/> Importer of record and that the actual owner, purchaser, or consignee for CBP purposes is as shown above, OR <input type="checkbox"/> owner or purchaser or agent thereof. I further declare that the merchandise <input type="checkbox"/> was obtained pursuant to a purchase or agreement to purchase and that the prices set forth in the invoices are true, OR <input type="checkbox"/> was not obtained pursuant to a purchase or agreement to purchase and the statements in the invoices as to value or price are true to the best of my knowledge and belief. I also declare that the statements in the documents herein filed fully disclose to the best of my knowledge and belief the true prices, values, quantities, rebates, drawbacks, fees, commissions, and royalties and are true and correct, and that all goods or services provided to the seller of the merchandise either free or at reduced cost are fully disclosed. I will immediately furnish to the appropriate CBP officer any information showing a different statement of facts. | | | | | | 37. Duty | |
| | | | | | | 38. Tax | |
| | | | | | | 39. Other | |
| | | | | | | 40. Total | |

41. DECLARANT NAME TITLE SIGNATURE DATE

| | | | |
|--|--|------------------------------|--|
| 42. Broker/Filer Information (Name, address, phone number) | | 43. Broker/Importer File No. | |
|--|--|------------------------------|--|