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

PAPERWORK REDUCTION ACT NOTICE: This request is in accordance with the Paperwork Reduction Act. We ask for the information in order to enforce the laws of the United States, to fulfill the U.S. Customs Regulations, to ensure that the claimant is entitled to drawback, and to have the necessary information which permits CBP to calculate and refund (or increase) the correct amount of duty and/or tax. Your response is required to obtain a benefit. The estimated average burden associated with this collection of information is 33 minutes per respondent depending on individual circumstances.

MERCHANDISE FOR PURPOSES OF DRAWBACK 19 CFR 191			Comments concerning the accuracy of this burden estimate and suggestions for reducing this burden should be directed to U.S. Customs and Border Protection, Asset Management, Washington, DC 20229, and to the Office of Management and Budget, Paperwork Reduction Project (1651-0075) Washington, DC 20503.						
Exporter or Destroyer			2. Drawback Entry	No. 3. Inter	o. 3. Intended Action			5. Drawback Center	
Name			☐ Exp		ort Destroy	Action (MM/DE			
Address			6. Contact Name				DATE RECEIVED		
			Address						
I.D. Number			Phone	Phone Ext					
			FAX						
7. Location of Merchandise	8. Method of Destruction		10. Exporting Carri (if known)	ier Name	11. Intende	ed Port of Expor	rt 12. Uni	12. Unique Identifier No.	
					13. T&EN	No.	14. Co	untry of Ultimate Destination	
15. Import Entry No. 16. Description of Merchandise (Include			le Part/Style/Serial Numbers)		17. Drawba	17. Drawback Amount		18. Quantity & Unit of Measure	
								19. HTSUS No./Schedule B	
20. Drawback to be filled as:					Reie	cted Merchandi	 SB		
			ndition Drawback under	r NAFTA		Shipped without Consent			
☐ J1 ☐ J2 ☐ Distilled Sp			pirits, Wine or Beer			☐ Defective at Time of Importation			
			J.S.C. 5062 (c)		☐ Not Conforming to Sample or Specifications				
21. Preparer							<u> </u>	THIS FORM MUST BE	
Printed Name			ignature		Titlo	Title Date		SUBMITTED WITH THE DRAWBACK CLAIM	
1 Tillited IV	ame		CBP USE	EONLY	Title		Date	DIAWDAOK CLAIM	
22. Examination Required (Additional information may be re requested, T & E may be require		29. Comments/Results of Examination or Witnessing matches invoice description)			nessing of Des	truction. (Merchandise			
23. Present Merchandise to	,	Phone Number							
26. Signature & Ba		26. Signature & Badge	e No		te Destroyed or Exam Conducted				
l x			31. Printed Nar		Name of Examini	•		2. Signature & Badge No.	
24. Destruction to be Witness	sed by	27. Date	28. Port	Phone N	lumber		X		
Customs Yes No						_Ext		 Date	