



# CERTIFICATE OF REGISTRATION

19 CFR 10.8, 10.9, 10.68,  
148.1, 148.8, 148.32, 148.37

(NOTE: Number of copies to be submitted varies with type of transaction.  
Inquire at Port Director's office as to number of copies required.)

NO.
DATE

VIA (Carrier)	B/L or INSURED NO.	DATE
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NAME, ADDRESS, AND ZIP CODE TO WHICH CERTIFIED FORM IS TO BE MAILED (If Applicable)	ARTICLES EXPORTED FOR:	
	<input type="checkbox"/> ALTERATION* <input type="checkbox"/> REPAIR* <input type="checkbox"/> USE ABROAD <input type="checkbox"/> REPLACEMENT	<input type="checkbox"/> PROCESSING* <input type="checkbox"/> OTHER, (specify) _____ _____
* NOTE: The cost or value of alterations, repairs, or processing abroad is subject to customs duty.		

### LIST ARTICLES EXPORTED

Number Packages	Kind of Packages	Description

SIGNATURE OF OWNER OR AGENT (Print or Type and Sign)	DATE
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### The Above-Described Articles Were:

EXAMINED		LADEN under my supervision	
DATE	PORT	DATE	PORT
SIGNATURE OF CUSTOMS OFFICER		SIGNATURE OF CUSTOMS OFFICER	

### CERTIFICATE ON RETURN

Duty-free entry is claimed for the described articles as having been exported without benefit of drawback and are returned unchanged except as noted: (use reverse if needed)

SIGNATURE OF IMPORTER (Print or Type and Sign)	DATE
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**NOTE: Certifying officers shall draw lines through all unused spaces with ink or indelible pencil.**

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