Approved OMB No. 1651-0055

Exp. 09-30-2008

| DEPARTMENT OF HOM U.S. Customs and E HARBOR MAIN | Border Protection | E | 1. Identifying | g Number | | |
|---|-----------------------------|---------------|--|---|-----------------------|--|
| QUARTERLY SU | | DRI | EIN or | IRS Number C | BP Number | SSN |
| <u>19 CF</u> | <u>R 24.24</u> | | 2. Company Nar | ne | | |
| Click for I | nstructions | | Individual Nar | me | | |
| 3. Complete Mailing Address | | | 4 | | | |
| | | | | | | |
| (Number and Street) | | (Number 2 | and Street 2) | | (City) | |
| (State) (Zip Code) | (Country) | (E-m | ail address) | Check here if addres | s has changed sinc | – e last filing. |
| (Phone Number) | (Fax Number) | | | | | |
| 4. REPORTING PERIOD | | O 1st Quarter | ⁻ (Jan. 1 - Mar. 31) | O 3rd Quarte | er (Jul. 1 - Sep. 30) | |
| Year (One Q | uarter Only) | 2nd Quarte | er (Apr. 1 - Jun. 30) | O 4th Quarte | er (Oct. 1 - Dec. 31) | |
| Type of Shipment With Class Code | 5. Value of Shipments | correspon | 6. emptions (from iding columns of line 15) | 7. Net Value (column 5 less column 6) | | 8. tiply the amounts appropriate rate) |
| A. Domestic Movements 503 | | | | | | |
| B. FTZ Admissions 505 | | | | | | |
| C. Passengers 504 | | | | | | |
| D. Total Line Value 5, 6 & 7 | | | | | | |
| 9. Total HMF Due (Total of Lines 8A t | hrough 8C) | | | | | |
| ITEMIZATION OF EXEMPTIONS | A. Domestics | F | B. TZ(s) | C. Passengers | | D. Total |
| 10. Exempt Port | | | | | | |
| 11. Inland Waterway Fuel Tax | | | | | | |
| 12. Intraport | | | | | | |
| 13. U.S. Mainland-State/Possession/ Territory | | | | | | |
| 14. Other | | 1 | | | | |
| 15. TOTALS (amounts in 15A thru 15D will automatically fill 6A thru 6D above) | | | | | | |

Continue

| Signature Nannette Voll | | Date | 8-22-2008 | Telephone Number | 317-614-4458 |
|--|--|---|--|---|--|
| 6650 Telecom Drive | | | | | |
| (Number and Street) | | | (Number | 2 and Street 2) | |
| Indianapolis | IN | 46278 | | | |
| (City) | (State) | (Zip C | ode) | | |
| submitted to the Government on other for number, e.g., the SED, Vessel Operation Rej | ms require port, to ve | ne Harbor N ed in the co rify that the | laintenance Fee. urse of shipping, | The number will be used exporting, or importing m | entification number provides unique to compare on this form with information nerchandise, which contain the identification rrent. Failure to disclose an identification |
| submitted to the Government on other for number, e.g., the SED, Vessel Operation Re number may cause a penalty pursuant to 1 | ms require port, to ve 9 CFR 24.2 | ne Harbor M ed in the co rify that the 24(h). | laintenance Fee. urse of shipping, information sub | The number will be used exporting, or importing m mitted is accurate and cur | to compare on this form with information herchandise, which contain the identification rrent. Failure to disclose an identification |
| submitted to the Government on other for number, e.g., the SED, Vessel Operation Rej | ms require port, to ve 9 CFR 24.2 is request e provision to allow (associate cumstanc oms and E | he Harbor M ed in the co rify that the 24(h). is in accord is of the Wa 2BP to deter ed with this es. Comme Border Prote | faintenance Fee. urse of shipping, information sub ance with the Pa ter Resources De mine if the corre collection of info ents concerning t ection, Informatic | The number will be used exporting, or importing m mitted is accurate and cur perwork Reduction Act. W velopment Act of 1988. W ct amount of Harbor Main rmation is 30 minutes per he accuracy of this burder on Services Division, Wash | to compare on this form with information herchandise, which contain the identification rrent. Failure to disclose an identification We ask for the information in order to We need it to ensure that the trade tenance Fee (HMF) is collected. It is respondent plus 10 minutes n estimate and suggestions for reducing |