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

OMB No. 1651-0024 Exp. 04-30-2015

ENTRY/IMMEDIATE DELIVERY

19 CFR 142.3, 142.16, 142.22, 142.24

	3. ENTRY TYPE CODE/NAME		4. ENTRY NUMBER			
6. SINGLE TRANS. BOND	7. BROKER/IMPORTER FILE NUMBER					
8. CONSIGNEE NUMBER				9. IMPORTER NUMBER		
CONSIGNEE NAME			11. IMPORTER OF RECORD NAME			
13. VOYAGE/FLIGHT/TRIP	14. LOCATION OF GOODS-CODE(S)/NAME(S)			E(S)		
I						
17. MANIFEST NUMBER	18. G.O. NUMBER		19. TOTAL VALUE			
23. MANIFEST QUANTITY	24. H.S. NU	MBER	25. COUNTRY OF ORIGIN	26. MANUFACTURER NO.		
N	28. CBP USE O			ONLY		
I hereby make application for entry/immediate delivery. I certify that the above information is accurate, the bond is sufficient, valid, and current, and that all requirements of 19 CFR Part 142 have been met.		OTHER AGENCY ACTION REQUIRED, NAMELY:				
DATE	CBP EXAMINATION REQUIRED.					
29. BROKER OR OTHER GOVT. AGENCY USE			ENTRY REJECTED, BECAUSE:			
	DELIVERY AUTHORIZED:	SIGNATU	IRE	DATE		
	 CONSIGNEE NUMBER VOYAGE/FLIGHT/TRIP NANIFEST NUMBER MANIFEST QUANTITY ANNIFEST QUANTITY I Certify that the above l, and current, and that all DATE 	8. CONSIGNEE NUMBER 11. IMPORTER 13. VOYAGE/FLIGHT/TRIP 14. LOCATION (17. MANIFEST NUMBER 18. G.O. NUMBI 23. MANIFEST QUANTITY 24. H.S. NU 23. MANIFEST QUANTITY 24. H.S. NU Parte Image: Comparison of the state of the sta	8. CONSIGNEE NUMBER 11. IMPORTER OF RECO 13. VOYAGE/FLIGHT/TRIP 14. LOCATION OF GOOD 17. MANIFEST NUMBER 18. G.O. NUMBER 23. MANIFEST QUANTITY 24. H.S. NUMBER 23. MANIFEST QUANTITY 24. H.S. NUMBER 10. 1 11. IMPORTER OF RECO 11. IMPORTER OF GOOD 11. IMPORTER OF GOOD 14. LOCATION OF GOOD 11. IMPORTER OF RECO 14. LOCATION 11. IMPORTER OF RECO 14. LOCATION 12. INPUT 12. LOCATION 13. INPUT 12. LOCATION 14. INPUT	8. CONSIGNEE NUMBER 11. IMPORTER OF RECORD NAME 13. VOYAGE/FLIGHT/TRIP 14. LOCATION OF GOODS-CODE(S)/NAM 17. MANIFEST NUMBER 18. G.O. NUMBER 23. MANIFEST QUANTITY 24. H.S. NUMBER 25. COUNTRY OF ORIGIN 23. MANIFEST QUANTITY 24. H.S. NUMBER 25. COUNTRY OF ORIGIN 23. MANIFEST QUANTITY 24. H.S. NUMBER 25. COUNTRY OF ORIGIN 24. H.S. NUMBER 25. COUNTRY OF ORIGIN 0 25. CBP USE 0 0 26. CBP USE 0 0 27. I certify that the above I, and current, and that all 0 0 28. CBP USE 0 0 0 29. CBP EXAMINATION REQUIRED 0 0 0 29. CBP USE 0 0 0 0 29. CBP USE 0 0 0 0 29. CBP USE 0 <		

Paperwork Reduction Act Statement: An agency may not conduct or sponsor an information collection and a person is not required to respond to this information unless it displays a current valid OMB control number and an expiration date. The control number for this collection is 1651-0024. The estimated average time to complete this application is 15 minutes. If you have any comments regarding the burden estimate you can write to U.S. Customs and Border Protection, Office of Regulations and Rulings, 799 9th Street, NW., Washington DC 20229.