



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

OMB Control NO: 1561-0023  
Expiration Date: 02-28-2022

**REQUEST FOR INFORMATION**

19 CFR 151.11

Date of Request _____		Date of Entry and Importation _____	
Manufacturer/Seller/Shipper _____		Carrier _____	Entry No. _____
Invoice Description of Merchandise _____		Invoice No. _____	HTSUS Item No. _____
Country of Origin/Exportation _____	CBP Broker Company Name _____		Broker Filer Code/Number _____
TO: Name: (Last, First, Middle Initial) _____ Street 1: _____ Street 2: _____ City: _____ State: _____ Zip Code: _____		FROM: _____ Street 1: _____ Street 2: _____ City: _____ State: _____ Zip Code: _____	
Production of Documents and/or Information Required by Law: If you have provided the information requested on this form to U.S. Customs and Border Protection at other ports, please indicate the port of entry to which it was supplied, and furnish a copy of your reply to this office, if possible.		Port _____	Date Information Furnished _____

**GENERAL INFORMATION AND INSTRUCTIONS**

Please Answer Indicated Question(s)		Please Furnish Indicated Item(s)	
<input type="radio"/> A.	Are you related (see reverse) in any way to the seller of this merchandise? If you are related, please describe the relationship, and explain how this relationship affects the price paid or payable for the merchandise.  <div style="border: 1px solid black; height: 100px; width: 100%;"></div>	<input type="radio"/> A.	Copy of contract (or purchase order and seller's confirmation thereof) covering this transaction, and any revisions thereto.
<input type="radio"/> B.	Identify and give details of any additional costs/expenses incurred in this transaction, such as:  <input type="radio"/> (1) packing <input type="radio"/> (4) assists <input type="radio"/> (2) commissions <input type="radio"/> (5) royalties and/or license fees <input type="radio"/> (3) proceeds that accrue to the seller	<input type="radio"/> B.	Descriptive or illustrative literature or information explaining what the merchandise is, where and how it is used, and exactly how it operates.
		<input type="radio"/> C.	Breakdown of components, materials, or ingredients by weight and the actual cost of the components at the time of assembly into the finished article.
		<input type="radio"/> D.	Submit samples: Article number and description _____  from container _____ mark(s)and number _____  Samples consumed in analysis, and other samples whose return is not specifically requested, will not normally be returned.
		<input type="radio"/> E.	See item below.

CBP Officer Message

Reply Message (If more space is needed, see continuation on page 2.) \_\_\_\_\_

**CERTIFICATION**

It is required that an appropriate corporate/company official execute this certificate and/or endorse all correspondence in response to the information requested. (NOTE: NOT REQUIRED IF FOREIGN FIRM COMPLETES THIS FORM.)

I hereby certify that the information furnished herewith or upon this form in response to this inquiry is true and correct, and that any samples provided were taken from the shipment covered by this entry.

Name (Last, First, Middle Initial) of Signer (Owner, Importer, or Corporate/Company Official) _____	Title/Position _____	Telephone No. _____
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Signature _____	Date _____
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CBP Official _____	Team Designation _____	Telephone No. _____
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Fax No. _____	Email _____
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