MANUFACTURER'S / SUPPLIER'S AFFIDAVIT

I. I,________as authorized representative of the company identified below, a manufacturer or supplier (as defined below) of parts indicated in the attached continuation pages, declare that the information provided herein was prepared in accordance with the applicable statutory and/or regulatory requirements and is accurate and complete to the best of my knowledge and belief as the manufacturer, or if the supplier, is based on a manufacturer's affidavit, which will be made available upon request. Should this information change, you will be notified immediately. This affidavit relates to information required under various customs and trade laws.

II. Definitions:

Manufacturer - A party that, using a systematic process through a division of labor and/or mechanical process, makes the good from materials and/or components.

Supplier - A party who is not the manufacturer, that sells, supplies or ships the good to consignee.

III. Signed:

Vendor Code	Name of Officer - Title
Corporation or Firm	Signature
Street Address	Date Completed
City & State or Province	Telephone
	Fax

Notes: 1) Signature and date blocs must be completed for affidavit to be valid

2) Provide immediate advice of any changes to the information provided.

3) Instructions included.

If you have additional questions regarding these requirements, you should seek advice from your Customs Broker, Public Accountant or Legal Council.

MANUFACTURER'S / SUPPLIER'S AFFIDAVIT

Continuation Sheet

Ven	dor Code:	Blanket Period: From: To:							
	Address:								
	City:					-			
S	State/Prov:								
	Country:								
UN	(A)	(B) MFG / SUPP	(C) COUNTRY OF	(D) KIT	(E) KIT %	(F) EXPORTED FROM THE U.S. WITH THE	(G) PRODUCED IN THE U.S. UNDER THE	(H) DFS	
P4	ART DESCRIPTION	(M/S)	ORIGIN	(Y/N)	KII %	BENEFIT OF DUTY DRAWBACK (Y/N)	TIB PROVISION 9813.00.05 (Y/N)	(Y/N/X)	
Part# Description									
Part# Description									
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NOTE: THIS IS TO BE CONSIDERED PART OF THE MANUFACTURERS AFFIDAVIT CONTINUATION SHEET AND THE SIGNED AFFIDAVIT APPLIES TO THE STATEMENTS MADE ON THIS SHEET.