



CP12345678XUS

United States Postal Service®
Customs Declaration and Dispatch Note — CP 72

IMPORTANT: This item may be opened officially. Please print in English, using blue or black ink, and press firmly; you are making multiple copies. See Privacy Notice and Indemnity Coverage on Sender's Copy.

| | | | | | |
|--|---------|---|-------------------------|--|--|
| FROM: Sender's Last Name | | First | M | Insured Amount (US \$) | SDR Value |
| Business | | | | \$ | \$ |
| Address (Number, street, suite, apt., P.O. Box, etc. Residents of Puerto Rico include Urbanization Code preceded with URB.) | | | | Insurance Fees (US \$) | Total Postage/Fees (US \$) |
| | | | | \$ | \$ |
| City | | State | ZIP+4® | 13. Sender's Customs Reference (if any) | |
| Telephone/Fax or Email | | | | 14. Importer's Reference - Optional (if any) | |
| TO: Addressee's Last Name | | First | M | 15. Importer's Contact (select one) <input type="checkbox"/> Telephone <input type="checkbox"/> Fax <input type="checkbox"/> Email | |
| Business | | 16. License No. | | | |
| Address (Number, street, suite, apt., P.O. Box, etc.) | | | | 17. Certificate No. | |
| Postcode | City | 18. Invoice No. | | | |
| State/Province | Country | 19. HS Tariff Number | | | |
| 1. Detailed Description of Contents (enter one item per line) | | | | 20. Country of Origin of Goods | |
| | | 2. Qty. | 3. Lbs. Oz. | 4. Value (U.S. \$) | |
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| | | | | | |
| 5. Check All That Apply: | | 6. Other Restrictions: | 7. Total Gross Wt: | 8. Total Value US \$ | 9. If non-deliverable: |
| <input type="checkbox"/> Gift <input type="checkbox"/> Returned Goods <input type="checkbox"/> Dangerous Goods | | (pertains to No. 11) | (all items Lbs. & Ozs.) | (all items) | <input type="checkbox"/> Treat as Abandoned |
| <input type="checkbox"/> Documents <input type="checkbox"/> Commercial Sample | | | | | <input type="checkbox"/> Return to Sender |
| <input type="checkbox"/> Merchandise <input type="checkbox"/> Humanitarian Donation <input type="checkbox"/> Other | | | | | <input type="checkbox"/> Redirect to Address Below |
| 10. AES/ITN/Exemption | | 11. Restriction: | | Mailing Office Date Stamp | |
| | | <input type="checkbox"/> Quarantine <input type="checkbox"/> Sanitary or Phytosanitary Inspection | | | |
| 12. I certify the particulars given in this customs declaration are correct. This item does not contain any undecleared dangerous articles, or articles prohibited by legislation or by postal or customs regulations. I have met all applicable export filing requirements under federal law and regulations. Sender's Signature and Date | | | | | |
| | | | | Month Day Year | |