## **CERTIFICATE OF ORIGIN – SAMPLE ONLY**

Exporter Name and Address		Blanket Period: (DD/MM/YYYY)					
		FROM:					
Tax Identification Number		TO:					
Producer Name and Address		Importer Name and Address:					
Producer Name and Address		importer Name and Address.					
Tax Identification Number: Tax		Tax Identific	ification Number:				
Description of Good(s)	TARRIF		PREFERENCE	PRODUCER	NET	COUNTRY	
		SSIFICATION	CREITERION		COST	OF	
	I	NUMBER				ORIGIN	
	X						
			<u> </u>				

## I CERTIFY THAT:

- Information provided in this certificate is based on facts and is accurate and I assume the responsibility for proving such representations. I understand that I am liable for any false statement or material omission made on or in concern with this document.
- I agree to maintain and present upon request documentation necessary to support this certificate and to inform, in writing, all persons to whom this certificate was given of any changes that would affect accuracy or validity of this certificate.
- This certificate consists of \_\_\_\_\_\_ pages including all attachments

Authorized Signature:		COMPANY:	COMPANY:	
Name: (Print or Type)		TITLE:		
Date: DD/MM/YYYY	Ph: xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx	Fax:	Customs Form:	
		xxxxxxxxxxxxxxx		