

ENTRY SUMMARY

1. Filer Code/Entry No.		2. Entry Type		3. Summary Date			
4. Surety No.		5. Bond Type		6. Port Code			
7. Entry Date		8. Importing Carrier		9. Mode of Transport			
10. Country of Origin		11. Import Date		12. B/L or AWB No.			
13. Manufacturer ID		14. Exporting Country		15. Export Date			
16. I.T. No.		17. I.T. Date		18. Missing Docs			
19. Foreign Port of Lading		20. U.S. Port of Unlading		21. Location of Goods/G.O. No.			
22. Consignee No.		23. Importer No.		24. Reference No.			
25. Ultimate Consignee Name and Address			26. Importer of Record Name and Address				
M PLUS LLC 19 WALL ST			M PLUS LLC 19 WALL ST				
Destination: CA City PASSAIC		Customer Reference # 9		City PASSAIC State NJ Zip 07055-8346			
27.		28. Description of Merchandise		32.			
29.		30.		33.			
A. HTSUS No.		A. Grossweight		A. HTSUS Rate			
B. ADA/CVD No.		B. Manifest Qty.		B. ADA/CVD Rate			
Line No.		Net Quantity in		C. IRC Rate			
		HTSUS Units		D. Visa No.			
001		50 CTNS		A. Entered Value			
ARTICLE OF CHINA,US NTE 20(UU)		480 KG		B. CHGS			
OTH; MDE UP ARTI.INCLD.DRES.PA		20,000.00 NO		C. Relationship			
		432.00 KG		D. Visa No.			
		499 - Merchandise Processing Fee		N			
Totals for Invoice		Invoice Value		Exchange			
2020033101		USD		1.00000			
				Entered Value			
				USD			
Other Fee Summary for Block 39		35. Total Entered Value		CBP USE ONLY			
499 - MPF				A. LIQ CODE			
		Total Other Fees		B. Ascertained Duty			
				37. Duty			
36. DECLARATION OF IMPORTER OF RECORD (OWNER OR PURCHASER) OR AUTHORIZED AGENT				REASON CODE			
<p>I declare that I am the <input type="checkbox"/> Importer of record and that the actual owner, purchaser, or consignee for CBP purposes is as shown above, OR <input checked="" type="checkbox"/> owner or purchaser or agent thereof. I further declare that the merchandise <input checked="" type="checkbox"/> was obtained pursuant to a purchase or agreement to purchase and that the prices set forth in the invoices are true, OR <input type="checkbox"/> was not obtained pursuant to a purchase or agreement to purchase and the statements in the invoices as to value or price are true to the best of my knowledge and belief. I also declare that the statements in the documents herein filed fully disclose to the best of my knowledge and belief the true prices, values, quantities, rebates, drawbacks, fees, commissions, and royalties and are true and correct, and that all goods or services provided to the seller of the merchandise either free or at reduced cost are fully disclosed.</p> <p>I will immediately furnish to the appropriate CBP officer any information showing a different statement of facts.</p>				C. Ascertained Tax			
				D. Ascertained Other			
				D. Ascertained Total		38. Tax	
						39. Other	
41. DECLARANT NAME		TITLE		SIGNATURE			
Atty-In-Fact							
42. Broker/Filer Information (Name, address, phone number)				DATE			
				04/07/20			
				43. Broker/Importer File No.			