



**IMPORTER SECURITY FILING (ISF) DATA ENTRY FORM**

<b>DATE:</b>		
<b>FROM:</b>	<b>CONTACT NAME:</b>	<b>PHONE:</b>

<b>MASTER BILL:</b>	<b>PORT OF LADING:</b>	<b>VESSEL:</b>
<b>HOUSE BILL:</b>	<b>PORT OF UNLADING:</b>	<b>VOYAGE:</b>
<b>CARRIER (SCAC):</b>	<b>PORT OF ENTRY:</b>	<b>EST. SAIL DATE:</b>
<b>CONTAINER:</b>	<b>EST. LOAD DATE:</b>	<b>EST ARRIVAL DATE:</b>

<b>IMPORTER</b>	<b>MANUFACTURER/SUPPLIER</b>	<b>SHIP TO / DELIVER TO PARTY</b>

<b>SELLER</b>	<b>CONTAINER STUFFING LOCATION</b>	<b>CONSIGNEE</b>

<b>BUYER</b>	<b>CONSOLIDATOR/STUFFER</b>	<b>C/O:</b>
		<b>P.O. NO.:</b>

<b>COMMODITY</b>	<b>HTS-6 OR 10</b>

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