

**ANDEAN TRADE PROMOTION AND DRUG ERADICATION ACT
TEXTILE CERTIFICATE OF ORIGIN**

1. Exporter Name & Address:

2. Producer Name & Address:

3. Importer Name & Address:

4. Description of Article:

5. Preference Group:

Group	Each description below is only a summary of the cited CFR provision.	19 CFR
A	Apparel assembled from U.S. formed, dyed, printed and finished fabrics or fabric components, or U.S. formed knit-to-shape components from U.S. or Andean yarns.	10.243(a)(1)(i)
B	Apparel assembled from Andean chief value llama, alpaca or vicuña fabrics, fabric components, or knit-to-shape components, from Andean yarns.	10.243(a)(1)(ii)
C	Apparel assembled from fabrics or yarns considered as being in short supply in the NAFTA	10.243(a)(1)(iii)
D	Apparel assembled from fabrics or yarns designated as not available in commercial quantities in the United States.	10.243(a)(1)(iv)
E	Apparel assembled from a combination of two or more yarns, fabrics, fabric components, or knit-to-shape components described in preference groups A through D.	10.243(a)(2)
F	Handloomed, handmade, or folklore textile and apparel goods	10.243(a)(3)
G	Brassieres assembled in the U.S. and/or one or more Andean beneficiary countries	10.243(a)(4)
H	Textile luggage assembled from U.S. formed fabrics from U.S. yarns	10.243(a)(5)&(6)
I	Apparel assembled from Andean formed fabrics, fabric components, or knit-to-shape components from U.S. or Andean yarns, whether or not also assembled, in part, from yarns, fabrics and fabric components described in preference groups A through D.	10.243(a)(7)

6. U.S./Andean Fabric Producer Name & Address:

7. U.S./Andean Yarn Producer Name & Address:

8. Handloomed, Handmade, or Folklore Article:

9. Name of Short Supply Fabric or Yarn:

I certify that the information on this document is complete and accurate and I assume the responsibility for proving such representations. I understand that I am liable for any false statements or material omissions made on or in connection with this document. I agree to maintain, and present upon request, documentation necessary to support this certificate.

10. Authorized Signature:

11. Company:

12. Name: (Print or Type)

13. Title:

14. Date: (DD/MM/YY)

15. Blanket Period

From:

To:

16. Telephone:

Facsimile: