End User Statement					
END	O USE	:R			
	ADDRESS LINE 1:				
ADE LINI	DRES	S	_		
CITY:				POSTAL CODE:	
COUNTRY:				TELEPHONE OR FAX:	
DISE	POSIT	TION OF USE OF		MED ABOVE (select <i>one</i> of boxes below)	
A.	0011	Will be used by us (as capital equipment) in the form in which received in a manufacturing process in the country named in Block 1 and will not be re-exported or incorporated into an end product.			
В.		Will be processed or incorporated by us into the following product (s) to be manufactured in the country named in Block 1 for distribution in			
C.		Will be resold by us in the form in which received in the country named in Block 1 for use or consumption therein. The specific end-use by my customer will be			
D.		Will be reexported by us in the form in which received to			
E.	Other (describe fully)				
NAT	URE	OF BUSINESS (OF END USER NAMED ABOV	/E	
The nature of our business is					
Our business relationship with Laversab Inc is					
and we have had this business relationship for years					
We c do no suppl which Expo and S this s commodispo	ertify for kno lemen n occu rt Adn Securi statem nercia	w of any additionatal statement to the statement to the statem ninistration Regulaty, we will not re-eet (1) to any could invoice, or any of the items contra	contained in this statement are to all facts which are inconsistent we e U.S. Exporter, disclosing any conent has been prepared and forwations (15 CFR parts 730-774), coexport, resell, or otherwise disponentry not approved for export as lather means, or (2) to any person	true and correct to the best of our knowledge and we with the above statement. We shall promptly send a hange of facts or intentions set forth in this statement warded, except as specifically authorized by the U.S. or by prior written approval of the Bureau of Industry se of any items approved on a license supported by brought to our attention by means of a bill of lading, in if we know that it will result directly or indirectly, in in this statement or contrary to Export Administration	
SIGNATURE OF OFFICIAL OF END USER					
NAME OF OFFICIAL					
TITLE OF OFFICIAL					
DATE:					

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