Completed document(s) must be submitted 72 hours prior to vessel departure

**Email as a single PDF attachment to** [**BPA@fedex.com**](mailto:BPA@fedex.com)

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| --- | --- | --- | --- |
| **Name** | | **Email** | |
| **New ISF-10** | **Update Existing ISF-10** | | **Delete Existing ISF-10** |
| **Importer Reference / Purchase Order** | | | |

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| --- | --- | --- | --- |
| **Vessel Sailing Date** | **Vessel ETA** | **AMS Master B/L and SCAC** | **AMS House B/L and SCAC** |
|  |  |  |  |
| **Port of Discharge** | **Customs Port of Entry** | **Container Number(s)** | |
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**Importer Of Record (IOR)**

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| **IOR No.** | **Name** | **Company** |
| **Phone** | **Email** | |
| **FedEx Trade Networks Contact** | | |

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| **Consignee No.** | **Name** | **Company** |
| **Phone** | **Email** | |

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| **Seller Name and Address** | **Ship To Name and Address** |
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| **Buyer Name and Address** | **Consolidator Name and Address** |
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| **Container Stuffing Location** | **Manufacturer (or Supplier) Name and Address** |
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| **Part Number** | **Description** | **HTS** | **Country of Origin** | **Manufacturer Name** |
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**If additional space is necessary, please use second page.**

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| **Vessel Sailing Date** | **AMS Master B/L With SCAC Code** | **AMS House B/L With SCAC Code** |
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| **Vessel ETA** | **Port of Discharge** | **Customs Port of Entry** |
|  |  |  |
| **Container Number(s)** | | |

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| **Seller Name and Address** | **Ship To Name and Address** |
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| **Part Number** | **Description** | **HTS** | **Country of Origin** | **Manufacturer Name** |
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