MANIFEST DISCREPANCY REPORT

TO: CUSTOMS AND BORDER PROTECTION

TODAY'S DATE	PORT OF ENTRY
SCN/PAPS	TRIP NUMBER
ARRIVAL DATE	PIECE COUNT/WEIGHT
DRIVER'S NAME	TRACTOR PLATE NUMBER
DESCRIPTION OF GOODS	OVERAGE REPORT SHORTAGE DECLARATION
COMPLETE DETAILS OF THE AMENDMENT/OMISSION OF THE GOODS IN QUESTION	
DETAILED REASON FOR DISCREPANCY (CHAIN OF EVENTS)	
CORRECTIVE ACTION PLAN	
I declare to the best of my knowledge and belief that the discrepancy described herein occurred for the reasons stated. I also certify that evidence to support a claim of nonimportation or proper disposition of merchandise will be retained in the carrier's files for a period of at least one year from the date of this report of discrepancy and will be made available to Customs upon demand.	
Signature P	rinted Name
Title C	Company Name
Tel: F	ax:
Email address:	

