

END USE / END USER STATEMENT

All Red and yellow parts are required. Do not delete any part of this form.

Wenzel requests the following information when placing an order to ensure compliance with all export restrictions.

Wenzel Associates will not contact the end user for any reason or share this contact information with any other sales entity.

End user information is for record keeping purposes and EAR and ITAR information only.

PO # Enter PO # of the order given directly to Wenzel (Please fill in Purchasing Company PO #)

Qty	Part Number	Description
Enter	Enter	Enter
If sending before the quote, enter as much of the above information as possible, to be updated at placement of order.		
Please check one:		
Commercial		Military

SPECIFIC END-USE. These products will be incorporated or used in the following end product(s) or system(s). Please be specific; provide program name and a detailed description of the specific platform and/or application, as well as a detailed description of function/purpose of this part within the application.

Read the brief statement above this box and give as much information as possible.

ULTIMATE CONSIGNEE (ACTUAL END USER) (Spell out any abbreviations)

Nature of Business:	
Company Name	Phone Number
Street Address:	
City, State:	
Country:	ZIP code:
Technical Contact Name and Phone Number / E-mail Address	
Parts will be recd from (company name) _____ and used as described in Specific End Use. Fill in whichever company listed below sends the products to the actual end user.	

FOREIGN CONSIGNEE (Purchasing entity receiving shipment for storage, modification or incorporation into another item and then forwarding to Actual End User) (Spell out any abbreviations)

Nature of Business:	
Company Name	Phone Number
Street Address:	
City, State:	
Country:	ZIP code:
Technical Contact Name and Phone Number / E-mail Address	
Parts will be recd from (company name) _____ and shipped to (company name) _____ as recd () or integrated into () (describe) _____	

The above line follows every participant on this form. Fill in which company they will receive the parts from and which company they will ship the parts to. Then check either that this participant ships the parts as they received them or integrates them into something else. If the parts are integrated, please describe. This section **MUST** be filled out for every participant.

INTERMEDIATE CONSIGNEE (Agent, representative or foreign freight forwarder) (Spell out any abbreviations)

Nature of Business:	
Company Name	Phone Number
Street Address:	
City, State:	
Country:	ZIP code:
Technical Contact Name and Phone Number / E-mail Address	
Parts will be recd from (company name) _____ and shipped to (company name) _____ as recd () or integrated into () (describe) _____	

Fill out the line above if an intermediate consignee is listed.

ANY OTHER PARTY INVOLVED (Spell out any abbreviations)

Nature of Business:	Role:
Company Name N/A if not needed	Phone Number
Street Address:	
City, State:	
Country:	ZIP code:
Contact Name and Phone Number / E-mail Address	

US FREIGHT FORWARDER (If used) (Spell out any abbreviations)

Company Name N/A if not needed	Phone Number
Street Address:	
City, State:	
Country:	ZIP code:
Contact Name and Phone Number / E-mail Address	

PURCHASING COMPANY (Spell out any abbreviations)

Nature of Business:	This is the company who actually purchases from Wenzel, who will pay Wenzel.	
Company Name	Phone Number	
Street Address:		
City, State:		
Country:	ZIP code:	
Technical Contact Name and Phone Number / E-mail Address		
Parts will be shipped to (company name) _____ as recd from Wenzel ()		
or integrated into () (describe) _____		

Fill out the line above.

The certification should be signed by the Purchasing company. If the End Use is sent to the End User to be filled out and the End User signs the certification, that is okay. But the purchasing company must sign beneath the End User's signature, and include the printed name, title, company and date.

CERTIFICATION: I certify that all of the information given in this statement is true and correct to the best of my knowledge and belief and that I have not knowingly omitted any information that is inconsistent with this statement.

Furthermore, by signing this EUS, I certify that I and my organization will not re-export these commodities without complying with all U.S. Export Administration Regulations. Diversion contrary to U.S. law is prohibited.

We confirm that we will verify compliance with requirements associated with various lists, including the Denied Persons List, Unverified List, Entity List, Specially Designated National Lists, Debarred List and Nonproliferation Sanctions List.

We certify that all prohibitions from 15 CFR 744 will be complied with: including but not limited to nuclear activity or propulsion plants, missile systems, drones, rocket systems, chemical or biological proliferation activities, foreign vessels or aircraft, weapons of mass destruction.

We certify that these parts will not be exported to any Group D country, to any embargoed country listed in Country Group E:2, or to a terrorist supporting country listed in Country Group E:1 nor to a country that is NOT listed as Country Group B (all Country Groups as itemized in Supplement No. 1 to EAR Part 740) without the approval of the United States Government.

Signature of Purchaser	Printed name, Title of Purchaser, Company	Date
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Please fax this form to 512-719-4086 or e-mail to sandy.sawicki@wenzel.com . Thank you for your assistance.