

**Sea Lion**  
 (sample document)  
 DS-2031

00LU 6127155 # 8221



U.S. Department of State  
**SHRIMP EXPORTER'S/IMPORTER'S DECLARATION**  
 (SEE INSTRUCTIONS ON REVERSE)

OMB APPROVAL NO. 1405-0095  
 EXPIRATION DATE: 09/30/2010  
 ESTIMATED BURDEN: 10 minutes\*

No. TH **142702**

1. Harvesting Nation  THAILAND		2. Aquaculture Facility (If applicable) (Name and Address)  DETAILS AS PER ATTACHED SHEET	
3. Exporter (Name, Address, and Telephone/Fax)  MARINE GOLD PRODUCTS LIMITED 57/37 MOO4 EKACHAI ROAD KOKKARM, MUANG, SAMUTSAKORN 74000 THAILAND		4. U.S. Importer/Ultimate Consignee (Name, Address, and Telephone/Fax)  SEA LION INTERNATIONAL, INC. 2000 BANKS ROAD, SUITE 222, MARGATE, FL 33063 USA FAX: 954-346-6951	
5. Date of Export (mm-dd-yyyy) <b>02-03-2010</b>			
6. Description of Product			
U.S. HTS Tariff Schedule Number  1605.20	Number of Units  3,035 CARTONS	Net Weight in Kilograms  13,766.68 KGS.	
7. Exporter's Declaration (To be completed by a responsible agent of the exporter of the product) I hereby declare that the shipment of shrimp accompanying this declaration (check one): A. <input checked="" type="checkbox"/> Harvested in a manner not harmful to sea turtles. Check the condition of harvest which applies: 1. <input checked="" type="checkbox"/> Harvested by aquaculture 2. <input type="checkbox"/> Harvested using TEDs 3. <input type="checkbox"/> Harvested using non-mechanical net retrieval or by special gear (see the Instructions) 4. <input type="checkbox"/> Shrimp harvested in a manner or under circumstances determined by the Department of State not to pose a threat of the incidental taking of sea turtles B. <input type="checkbox"/> Harvested in the waters of a nation currently certified pursuant to Section 609 of P.L. 101-162. PO NUMBER 3237 (STH1014643)			
Exporter (Name and Title)  Mrs. SIRIWAN LUESUKPRASERT  ADMINISTRATION DEPARTMENT MANAGER	Signature    	Date (mm-dd-yyyy)  02-03-2010	
8. Government Certification (Necessary only if box 7a above is checked; to be signed by a responsible Government official of the harvesting nation) I hereby declare that the statements signed above by the exporter of this shipment of shrimp are true and accurate to the best of my knowledge.			
Name/Agency/Title  DEPARTMENT OF FISHERIES	Address/Telephone/Fax  PAHOLYOTHIN RD., CHATUCHAK, BANGKOK 10900, THAILAND	Signature    Miss Jutarat Kittiwanch Fisheries Biologist	Date (mm-dd-yyyy)   FEB 2010
9. Import Information (To be completed by U.S. importer or Customs broker)			
Date of Entry (mm-dd-yyyy)	Port of Entry	Entry Number	Signature