

**Caribbean Basin Trade Partnership Act  
Textile Certificate of Origin**

1. Exporter Name & Address		2. Producer Name & Address	
3. Importer Name & Address		6. U.S./Caribbean Fabric Producer Name & Address	
4. Description of Article	5. Preference Group	7. U.S. / Caribbean Yarn Producer Name & Address	
		8. U.S. Thread Producer Name & Address	
		9. Name of Handloomed, Handmade, or Folklore Article	
10. Name of Preference Group G Fabric or Yarn:			

**Preference Groups:**

- A: Apparel assembled from U.S.- formed and cut fabric from U.S. yarn [19 CFR 10.223(a)(1)].
- B: Apparel assembled and further processed from U.S.- formed and cut fabric from U.S. yarn . [19 CFR 10.223(a)(2)].
- C: Non-Knit apparel cut and assembled from U.S. fabric from U.S. yarn and thread. [19 CFR 10.223(a)(3)]
- D: Apparel Knit to shape from U.S. yarn and knit apparel cut and assembled from regional or U.S. fabric from U.S. yarn [19 CFR 10.223(a)(4)]
- E: Non- underwear t-shirts made of regional fabrics from U.S. yarn [19 CFR 10.223(a)(5)].
- F: Brassieres cut and assembled in the United States and/ or one or more CBTPA beneficiary countries [19 CFR 10.223(a)(6)].
- G: Apparel cut and assembled in one or more CBTPA beneficiary countries from fabrics or yarn not formed in the United States or one or more CBTPA beneficiary Countries ( as identified in NAFTA) or designated as not available in commercial quantities in the United States [19 CFR 10.223(a)(7) o (a)(8)].
- H: Handloomed, handmade, or folklore articles [19 CFR 10.223(a)(9)].
- I: Luggage assembled from U.S.- formed and cut fabric from U.S. yarn [19 CFR 10.223(a)(10)].
- J: Knitted or crocheted apparel cut and assembled from U.S. fabric from U.S. yarn and thread. [19 CFR 10.223(a)(11)].

I certify that the information on this document is complete and accurate and I assume the responsibility for proving such representations. I understand that I am liable for any false statements or material omissions made on or in connection with this document.  
I agree to maintain, and present upon request, documentation necessary to support this certificate.

12. Authorized Signature		13. Company	
14. Name ( Print or Type)		15. Title	
16.a.Date (DD/MM/YY)	16.b. Blanket Period From:            To:	17. Telephone Number: Facsimile Number:	