




DEPARTMENT OF HOMELAND SECURITY
U.S. Customs and Border Protection

OMB CONTROL NO: 1651-0001
EXPIRATION DATE: 11/30/2025

**INWARD CARGO MANIFEST FOR VESSEL UNDER
FIVE TONS, FERRY, TRAIN, CAR, VEHICLE, ETC.**
19 CFR 123.4, 123.7, 123.61

CBP Manifest/In Bond Number
92Q-2011653-8
Page No. Page 1 of 1

1. Name or Number and Description of Importing Conveyance HMKD801487		2. Name of Master or Person in Charge (Last Name, First Name, MI)	
3. Name (Last, First, M.I.) and Address of Owner DMTC TECHNOLOGY SERVICES S DE RL DE AVE DESARROLLO NO 540 PARQUE INDUST GUADALUPEGUADALUPE		4. Foreign Port of Lading NUEVO LAREDO, MX	5. U.S. Port of Destination LAREDO, TX - 2304
6. Port of Arrival LAREDO, TX - 2304 - WORLD TRADE BRIDGE		7. Date of Arrival 05/13/2026	

Bill of Lading or Marks & Numbers or Address of Consignee on Packages	Car Number and Initials	Number and Gross Weight (in kilos or pounds) of Packages and Description of Goods	Name of Consignee	For Use By CBP only
INV#: S-33074	HMKD801487	INVOICE VALUE: 808.46 2 PKG 220.00 KG	DEMATIC CORP.	
507 PLYMOUTH AVE NE GRAND RAPIDS, MI 49505-6029		PARTS FOR CONVEYORS 93 PCS		
TRACTOR LIC. PLATE NO.: HMKD801487				
<p>PREFILE ENTRY 92Q-2011653-8</p>  <p>*** CERTIFIED: 05/13/2026 17:17 ***</p>				
CARRIER: ARALO EXPRESS S A DE C V ACE: AXPG92Q20116538		FILER CODE 92Q	MID: MXDMTTEC540GUA IMP: 04-383487200 CON: 04-383487200	
<p><<< CRUZAR DESPUES DE: 05/13/2026 18:17 >>></p> <p>Atencion Transportistas</p>				
<p>De acuerdo a la ley aduanera Americana "Tariff Act of 1930" seccion 1433, el TRANSPORTISTA ES EL UNICO RESPONSABLE de presentar oportuna y correctamente el manifiesto de entrada, formato CF-7533, al momento de entrar al lote de importacion de la aduana Americana. Por lo tanto JOFFROY GROUP, NO se hace responsable por cualquier anomalia, error u omision que contenga este documento; así como de las repercusiones que esto pudiese ocasionar</p>				

CARRIER'S CERTIFICATE

To the Port Director of Customs, Port of Arrival:

JOFFROY GROUP
NOGALES Phone: 5202812472
Contact: YARETIZI NUNEZ
REF: 20116538

The undersigned carrier hereby certifies that DEMATIC CORP.
of GRAND RAPIDS, MI, 49505-6029

is the owner or consignee of such articles within the purview of section 484, Tariff Act of 1930.

I certify that this manifest is correct and true to the best of my knowledge.

Date 05/13/2026

Master or Person in charge _____
(Signature)



DEPARTMENT OF HOMELAND SECURITY
U.S. Customs and Border Protection


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19 CFR 123.4, 123.7, 123.61

CBP Manifest/In Bond Number
92Q-2011651-2
Page No. Page 1 of 1

1. Name or Number and Description of Importing Conveyance HMKD801487		2. Name of Master or Person in Charge (Last Name,First Name,MI)	
3. Name (Last, First,M.I.) and Address of Owner DMTC TECHNOLOGY SERVICES S DE RL DE AVE DESARROLLO NO 540 PARQUE INDUST GUADALUPEGUADALUPE		4. Foreign Port of Lading NUEVO LAREDO, MX	5. U.S. Port of Destination LAREDO, TX - 2304
6. Port of Arrival LAREDO, TX - 2304 - WORLD TRADE BRIDGE		7. Date of Arrival 05/13/2026	

Bill of Lading or Marks & Numbers or Address of Consignee on Packages	Car Number and Initials	Number and Gross Weight (in kilos or pounds) of Packages and Description of Goods	Name of Consignee	For Use By CBP only
INV#: EDPT-33074	HMKD801487	INVOICE VALUE: 21,703.90 14 PKG 2783.00 KG	DEMATIC CORP.	
507 PLYMOUTH AVE NE GRAND RAPIDS, MI 49505-6029		PARTS FOR CONVEYORS 58 PCS OTHER BELT TYPE CONTINUOU 1 PCS OTHER CONTINUOUS ACTION E 8 PCS		
TRACTOR LIC. PLATE NO.: HMKD801487				
PREFILE ENTRY 92Q-2011651-2				
				
*** CERTIFIED: 05/13/2026 17:15 ***				
CARRIER: ARALO EXPRESS S A DE C V ACE: AXP92Q20116512		FILER CODE 92Q		MID: MXDMTTEC540GUA IMP: 04-383487200 GON: 04-383487200
<<< CRUZAR DESPUES DE: 05/13/2026 18:15 >>>				
Atencion Transportistas				
<small>De acuerdo a la ley aduanera Americana "Tariff Act of 1930" seccion 1433, el TRANSPORTISTA ES EL UNICO RESPONSABLE de presentar oportuna y correctamente el manifiesto de entrada, formato CF-7533, al momento de entrar al lote de importacion de la aduana Americana. Por lo tanto JOFFROY GROUP, NO se hace responsable por cualquier anomalia, error u omision que contenga este documento, asi como de las repercusiones que esto pudiese ocasionar</small>				

CARRIER'S CERTIFICATE

JOFFROY GROUP
NOGALES Phone: 5202812472
Contact: YARETIZI NUNEZ
REF: 20116512

To the Port Director of Customs, Port of Arrival:

The undersigned carrier hereby certifies that DEMATIC CORP.
of GRAND RAPIDS, MI, 49505-6029

is the owner or consignee of such articles within the purview of section 484, Tariff Act of 1930.
I certify that this manifest is correct and true to the best of my knowledge.

Date 05/13/2026 Master or Person in charge _____
(Signature)

-- BILL OF LADING 7NR7549 - SHORT FORM - NOT NEGOTIABLE --

<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th align="center" colspan="2">SHIP FROM</th> </tr> <tr> <td>DEMATIC MONTERREY AVENIDA DESARROLLO 540 PARQUE INDUSTRIAL FINSA, CIUDAD GUADA GUADALUPE, NL 67100 CONTACT NAME: X</td> <td align="right">PHONE: 814-000-2510</td> </tr> </table>	SHIP FROM		DEMATIC MONTERREY AVENIDA DESARROLLO 540 PARQUE INDUSTRIAL FINSA, CIUDAD GUADA GUADALUPE, NL 67100 CONTACT NAME: X	PHONE: 814-000-2510	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>Bill of Lading Number: 7NR7549</td> </tr> <tr> <td>Carrier Name: TRAMO TRANSPORTES MONTERREY SA</td> </tr> <tr> <td>Trailer Number: HMKD 801487</td> </tr> <tr> <td>Seal Number:</td> </tr> <tr> <td>SCAC: TIXG</td> </tr> <tr> <td>Pro Number:</td> </tr> <tr> <td>Driver License #:</td> </tr> <tr> <td>License Exp:</td> </tr> <tr> <td>Freight Charge Terms(Freight charges are prepaid unless marked otherwise):</td> </tr> <tr> <td>Prepaid <input type="checkbox"/> Collect <input type="checkbox"/> 3rd Party <input checked="" type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/> Master bill of lading with attached underlying bills of lading.</td> </tr> </table>	Bill of Lading Number: 7NR7549	Carrier Name: TRAMO TRANSPORTES MONTERREY SA	Trailer Number: HMKD 801487	Seal Number:	SCAC: TIXG	Pro Number:	Driver License #:	License Exp:	Freight Charge Terms(Freight charges are prepaid unless marked otherwise):	Prepaid <input type="checkbox"/> Collect <input type="checkbox"/> 3rd Party <input checked="" type="checkbox"/>	<input type="checkbox"/> Master bill of lading with attached underlying bills of lading.
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CUSTOMER ORDER INFORMATION				
Customer Order No(s). TC0000091726630060, TC0000091726630059	# of Handling Units	Weight	Pallet/Slip (circle one)	Additional Shipper Information
Bill of Lading Number: 7NR7549	16.0	6618.0	Y N	
GRAND TOTAL	16.0	6618.0		

SHIPMENT INFORMATION													
Commodities requiring special or additional care or attention in handling or stowing must be marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC item 360.										LTL ONLY			
PO NBR	Item ID	Handling Unit		Package Unit		L	W	H	Weight (lbs)	HM (X)	Commodity Description	NMFC No.	Class
		Qty	Type	Qty	Type								
		16	PACKAGE						6,618		conveyor belts		

ADDITIONAL INFORMATION

Stop 1: TC0000091726630059 (Ship ID)

Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property as follows: The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____.

Note: Liability limitation for loss or damage in this shipment may be applicable. See 49 USC 14706(c)(1)(A) and (B).			
Received, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates classifications, and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.	The carrier shall not make delivery of this shipment without payment of charges and all other lawful fees. Shipper Signature _____	Trailer Loaded: <input type="checkbox"/> By Shipper <input type="checkbox"/> By driver	
Shipper Signature/Date _____ This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation	Carrier Signature/Pickup Date _____ Carrier acknowledges receipt of package and required placards. Carrier certifies emergency response information was made available and/or carrier has the Department of Transportation emergency response guidebook or equivalent documentation in the vehicle. Property described above is received in good order, except as noted.	Print Receiver Name and Company _____ Receiver's Signature/Date _____	Freight Counted: <input type="checkbox"/> By Shipper <input type="checkbox"/> By driver/pallets said to contain <input type="checkbox"/> By driver/pieces