

U.S. IMPORTERS' QUESTIONNAIRE

INVESTIGATION TITLE (PRODUCT FROM COUNTRIES)

This questionnaire must be received by the Commission by **DATE**
See last page for instructions regarding how to file this questionnaire.

The information called for in this questionnaire is for use by the United States International Trade Commission in connection with its review of the **countervailing duty/antidumping duty** order concerning #abbrproduct from #ctrysubs (inv. No. 701/731-TA-xxx (Review)). The information requested in the questionnaire is requested under the authority of the Tariff Act of 1930, title VII. This report is mandatory and failure to reply as directed can result in a subpoena or other order to compel the submission of records or information in your firm's possession (19 U.S.C. § 1333(a)).

| | |
|---|--|
| Name of firm | _____ |
| Address | _____ |
| City | _____ |
| State | _____ |
| Zip Code | _____ |
| Website | _____ |
| Has your firm imported #abbrproduct (as defined on the next page) <i>from any country</i> at any time since January 1, #bopyear? | |
| <input type="checkbox"/> NO | (Sign the certification below and promptly return only this page of the questionnaire to the Commission) |
| <input type="checkbox"/> YES | (Complete all parts of the questionnaire, and return the entire questionnaire to the Commission) |
| Return questionnaire via the Commission <i>Drop Box</i> by clicking on the following link: https://dropbox.usitc.gov/oinv/ . (PIN: XXXX). See last page for detailed instructions. | |

CERTIFICATION

I certify that the information herein supplied in response to this questionnaire is complete and correct to the best of my knowledge and belief and understand that the information submitted is subject to audit and verification by the Commission. By means of this certification I also grant consent for the Commission, and its employees and contract personnel, to use the information provided in this questionnaire and throughout this proceeding in any other import-injury investigations or reviews conducted by the Commission on the same or similar merchandise.

I, the undersigned, acknowledge that information submitted in response to this request for information and throughout this proceeding or other proceedings may be disclosed to and used: (i) by the Commission, its employees and Offices, and contract personnel (a) for developing or maintaining the records of this or a related proceeding, or (b) in internal investigations, audits, reviews, and evaluations relating to the programs, personnel, and operations of the Commission including under 5 U.S.C. Appendix 3; or (ii) by U.S. government employees and contract personnel, solely for cybersecurity purposes. I understand that all contract personnel will sign appropriate nondisclosure agreements.

Name of Authorized Official

Title of Authorized Official

Date

Signature

Phone

Email address

PART I.—GENERAL INFORMATION

Background.--On **Date**, the **Department of Commerce (“Commerce”)/the Treasury** issued a **countervailing duty order/an antidumping duty order/suspended an investigation** on imports of **#abbrproduct** from **#ctrysubs**. On **Date**, the Commission instituted a review pursuant to section 751(c) of the Tariff Act of 1930 (19 U.S.C. § 1675(c)) (the Act) to determine whether **revocation of the order/termination of the suspended investigation** would be likely to lead to continuation or recurrence of material injury to the domestic industry within a reasonably foreseeable time. If both the Commission and Commerce make an affirmative determination, the **order/suspension agreement** will remain in place. If either the Commission or Commerce makes a negative determination, Commerce will **revoke the order/terminate the suspension agreement**. Questionnaires and other information pertinent to this proceeding are available at **LINK**.

#abbrproduct covered by this proceeding is . . . **COMMERCE SCOPE LANGAUGE**

#abbrproduct **is/are** currently imported under statistical reporting numbers **XXXX.XX.XXXX** of the **Harmonized Tariff Schedule of the United States (HTSUS)**. **It/They may also be imported under HTSUS statistical reporting number XXXX.XX.XXXX**. The HTSUS provisions are for convenience and customs purposes; the written description of the scope is dispositive.

Reporting of information.--If information is not readily available from your records, provide carefully prepared estimates. If your firm is completing more than one questionnaire (i.e., a producer, importer, purchaser and/or foreign producer questionnaire), you need not respond to duplicated questions.

Confidentiality.--The commercial and financial data furnished in response to this questionnaire that reveal the individual operations of your firm will be treated as confidential by the Commission to the extent that such data are not otherwise available to the public and will not be disclosed except as may be required by law (see 19 U.S.C. § 1677f). Such confidential information will not be published in a manner that will reveal the individual operations of your firm; however, general characterizations of numerical business proprietary information (such as discussion of trends) will be treated as confidential business information only at the request of the submitter for good cause shown.

Verification.--The information submitted in this questionnaire is subject to audit and verification by the Commission. To facilitate possible verification of data, please keep all files, worksheets, and supporting documents used in the preparation of the questionnaire response. Please also retain a copy of the final document that you submit.

Release of information.--The information provided by your firm in response to this questionnaire, as well as any other business proprietary information submitted by your firm to the Commission in connection with this proceeding, may become subject to, and released under, the administrative protective order provisions of the Tariff Act of 1930 (19 U.S.C. § 1677f) and section 207.7 of the Commission's Rules of Practice and Procedure (19 CFR § 207.7). This means that certain lawyers and other authorized individuals may temporarily be given access to the information for use in connection with this proceeding or other import-injury proceedings conducted by the Commission on the same or similar merchandise; those individuals would be subject to severe penalties if the information were divulged to unauthorized individuals.

Valid number error messages.--If you are completing this form in a country that uses periods (".") to delineate multiples of 1000 (e.g., one million would appear as \$1.000.000 rather than \$1,000,000), you may be unable to enter in numbers greater than 999 in numeric form fields. The solution to this data entry issue is to temporarily change your operating system's number formatting to be consistent with the U.S. number formatting system while you complete this form. Detailed instructions on how to resolve this issue is provided at the end of this questionnaire and is available upon request from **INVESTIGATOR (202-xxx-xxxx, NAME@usitc.gov)**.

D-GRIDS tool.--The Commission has a tool that firms can use to move data from their own MS Excel compilation files into self-contained data tables within this MS Word questionnaire, thereby reducing the amount of cell-by-cell data entry that would be required to complete this form. This tool is a macro-enabled MS Excel file available for download from the Commission's generic questionnaires webpage (https://www.usitc.gov/trade_remedy/question.htm) called the "D-GRIDs tool." Use of this tool to help your firm complete this questionnaire is *optional*. Firms opting to use the D-GRIDs tool to populate their data into this questionnaire will need the D-GRIDs specification sheet PDF file specific to this proceeding (available on the case page which is linked under the "Background" above) which includes the necessary references relating to this questionnaire, as well as the macro-enable MS Excel D-GRIDs tool itself from the generic questionnaires page. More detailed instructions on how to use the D-GRIDs tool are available within the D-GRIDs tool itself.

I-1. **Reporting requirements.**--Please report below the actual number of hours required and the cost to your firm of completing this questionnaire for use by the Office of Management and Budget.

| Hours | Dollars |
|-------|---------|
| | |

The questions in this questionnaire have been reviewed with market participants to ensure that issues of concern are adequately addressed and that data requests are sufficient, meaningful, and as limited as possible. Public reporting burden for this questionnaire is estimated to average 50 hours per response, including the time for reviewing instructions, gathering data, and completing and reviewing the questionnaire.

We welcome comments regarding the accuracy of this burden estimate, suggestions for reducing the burden, and any suggestions for improving this questionnaire. Please provide such comments to the Office of Investigations, import_injury@usitc.gov.

I-2a. **Establishments covered.**--Provide the name and address of establishment(s) covered by this questionnaire.

"Establishment"--Each facility of a firm involved in the importation of #abbrproduct, including auxiliary facilities operated in conjunction with (whether or not physically separate from) such facilities.

| |
|--|
| |
|--|

I-2b. **Stock symbol information.**-- If your firm or parent firm is publicly traded, please specify the stock exchange and trading symbol: _____.

I-2c. **External counsel.**-- If your firm or parent firm is represented by external counsel in relation to this proceeding, please specify the name of the law firm and the lead attorney(s).

| | |
|-------------------|--|
| Law firm: | |
| Lead attorney(s): | |

I-3. **Ownership.**--Is your firm owned, in whole or in part, by any other firm?

No Yes--List the following information, relating to the ultimate parent/owner.

| Firm name | Country | Extent of ownership (percent) |
|-----------|---------|----------------------------------|
| | | |
| | | |
| | | |

“Related firm” –A firm that your firm solely or jointly owned, managed, or otherwise controlled; a firm that solely or jointly owned, managed, or otherwise controlled your firm; and/or a firm that was solely or jointly owned, managed, or otherwise controlled by a firm that also solely or jointly owned, managed, or otherwise controlled your firm.

I-4. **Related importers/exporters.**--Does your firm have any related firms, either domestic or foreign, that are engaged in importing #abbrproduct into the United States or that are engaged in exporting #abbrproduct to the United States?

No Yes--List the following information.

| Firm name | Country | Affiliation |
|-----------|---------|-------------|
| | | |
| | | |
| | | |

I-5. **Related producers.**--Does your firm have any related firms, either domestic or foreign, that are engaged in the production of #abbrproduct?

No Yes--List the following information.

| Firm name | Country | Affiliation |
|-----------|---------|-------------|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

I-6. **Importing operations.**--Please indicate the nature of your firm’s importing operations on #abbrproduct. The importer of record is expected to complete this questionnaire; however, more than one answer may be applicable.

| Importer of record | Takes title to the imported product(s) | Consignee of the imported products(s) | Customs broker or freight forwarder |
|--------------------------|--|---------------------------------------|-------------------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

I-7. **Consignees.**--If your firm is an importer of record of #abbrproduct but is not the consignee, please list the consignees below (firm name, address, telephone number, and individual to contact).

| Firm name | Address | Contact person and phone number |
|-----------|---------|---------------------------------|
| | | |
| | | |
| | | |

I-8. **FTZ or bonded warehouses.**--Please indicate whether your firm enters #abbrproduct into, or withdraws such merchandise from, foreign trade zones or bonded warehouses.

“Foreign trade zone” is a designated location in the United States where firms utilize special procedures that allow delayed or reduced customs duty payments on foreign merchandise, as well as other savings. A foreign trade zone must be designated as such pursuant to the rules and procedures set forth in the Foreign-Trade Zones Act.

“Bonded warehouse” is a secured facility supervised by U.S. customs, where dutiable landed imports are stored pending their re-export, or release after payment of import duties, taxes, and other charges. A bonded warehouse must be designed as such pursuant to the rules and procedures set forth in 19 U.S.C. § 1555.

| Item | No | Yes | Quantity (in #units) entered in #termyear |
|---------------------|--------------------------|--------------------------|---|
| Foreign trade zones | <input type="checkbox"/> | <input type="checkbox"/> | |
| Bonded warehouses | <input type="checkbox"/> | <input type="checkbox"/> | |

I-9. **Other trade actions.**--To your knowledge, have the products subject to this proceeding been the subject of any other import relief proceedings in the United States or in any other countries?

| No | Yes | If yes, please specify. |
|--------------------------|--------------------------|-------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | |

PART II.--TRADE AND RELATED INFORMATION

Further information on this part of the questionnaire can be obtained from **INVESTIGATOR (202-xxx-xxxx, NAME@usitc.gov)**. **Supply all data requested on a calendar-year basis.**

II-1. **Contact information.**--Please identify the responsible individual and the manner by which Commission staff may contact that individual regarding the confidential information submitted in Part II.

| | |
|-----------|--|
| Name | |
| Title | |
| Email | |
| Telephone | |

II-2a. **Changes in operations.**--Has your firm experienced any changes in ownership or in the nature of its importing operations for steel nails since January 1, #bopyear?

| No | Yes | If yes, supply details as to the time, nature, and significance of such changes and describe reasons for the changes, including any underlying assumptions used. |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | |

II-2b. **COVID-19 pandemic.**— Has the COVID-19 pandemic or have any government actions taken to contain the spread of the COVID-19 virus resulted in changes in your firm's supply chain arrangements, importation, employment, and shipments relating to #abbrproduct? In your response, please discuss the duration and timing of any such changes as they relate to your firm's operations.

| No | Yes | If yes, describe these changes including the impact over time on the (a) supply chain, (b) importation and shipments, and (c) employment with respect to #abbrproduct. |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | |

II-2c. **Anticipated changes in operations.**— Does your firm anticipate any changes in in the character of its operations or organization relating to the importation of #abbrproduct in the future?

| No | Yes | If yes, supply details as to the time, nature, and significance of such changes and provide underlying assumptions. |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | |

II-3. **Arranged imports.**--Has your firm imported or arranged for the importation of #abbrproduct for delivery after **DATE**?

“Arranged imports” are imports for which your firm has placed an order with a foreign supplier for subject merchandise, but delivery of those imports is not scheduled to occur until after the date listed above.

No Yes—Fill out the table below.

| Quantity (in #units) | | | | |
|----------------------|--------------|--------------|---------------|--------------|
| Period/Source | Jan-Mar 2019 | Apr-Jun 2019 | Jul-Sept 2019 | Oct-Dec 2019 |
| #ctrysubA | | | | |
| #ctrysubB | | | | |
| #ctrysubC | | | | |
| All other sources | | | | |

II-4. **Reasons for importing if producer.**--If your firm also produces #abbrproduct in the United States, please indicate the reasons for importing this product. If your firm’s reasons differ by source, please elaborate.

Definitions

"Imports" –Those products identified for Customs purposes as imports for consumption for which your firm was the importer of record (i.e., was responsible for paying any import duty).

"Import quantities" –Quantities reported should be net of returns.

"Import values"—Values reported should be landed, duty-paid values at the U.S. port of entry, including ocean freight and insurance costs, brokerage charges, and import duties (i.e., all charges except inland freight in the United States).

"U.S. commercial shipments"— Shipments made within the United States as a result of an arm's length commercial transaction in the ordinary course of business. Report net values (i.e., gross sales values less all discounts, allowances, rebates, prepaid freight, and the value of returned goods) in U.S. dollars, f.o.b. your point of shipment.

"Internal consumption" –Product consumed internally by your firm. Such transactions are valued at fair market value.

"Transfers to related firms" –Shipments made to related firms. Such transactions are valued at fair market value.

"Related firm" –A firm that your firm solely or jointly owned, managed, or otherwise controlled; a firm that solely or jointly owned, managed, or otherwise controlled your firm; and/or a firm that was solely or jointly owned, managed, or otherwise controlled by a firm that also solely or jointly owned, managed, or otherwise controlled your firm.

"Export shipments"— Shipments to destinations outside the United States, including shipments to related firms.

"Inventories" --Finished goods inventory, not raw materials or work in progress.

Note: As requested in Part I of this questionnaire, please keep all supporting documents/records used in the preparation of the trade data, as Commission staff may contact your firm regarding questions on the trade data. The Commission may also request that your company submit copies of the supporting documents/records (such as production and sales schedules, inventory records, etc.) used to compile these data.

[DRAFTING NOTE: all subsequent (second and beyond) full reviews collect data for only THREE years plus any relevant interim period.]

II-5a. **Imports: #CtrysubA.**--Report your firm's imports and your firm's shipments and inventories of #abbrproduct imported from #CtrysubA during the specified periods.

#CTRYSUBA

| Quantity (in #units), value (in \$1,000) | | | | | | | | |
|---|---------------|------|------|------|------|------|-------------------|------|
| Item | Calendar year | | | | | | January-#intmonth | |
| | 2017 | 2018 | 2019 | 2020 | 2021 | 2022 | 2022 | 2023 |
| Beginning-of-period inventories (quantity) (A) | | | | | | | | |
| Imports:¹ | | | | | | | | |
| Quantity (B) | | | | | | | | |
| Value (C) | | | | | | | | |
| U.S. shipments: | | | | | | | | |
| Commercial shipments: | | | | | | | | |
| Quantity (D) | | | | | | | | |
| Value (E) | | | | | | | | |
| Internal consumption:² | | | | | | | | |
| Quantity (F) | | | | | | | | |
| Value ² (G) | | | | | | | | |
| Transfers to related firms:² | | | | | | | | |
| Quantity (H) | | | | | | | | |
| Value ² (I) | | | | | | | | |
| Export shipments:³ | | | | | | | | |
| Quantity (J) | | | | | | | | |
| Value (K) | | | | | | | | |
| End-of-period inventories: (quantity) (L) | | | | | | | | |

¹ Please identify the foreign producers, if known: _____.

² Internal consumption and transfers to related firms must be valued at fair market value. If your firm uses a different basis for valuing these transactions in your records, please specify that basis (e.g., cost, cost plus, etc.): _____. However, the data provided above in this table should be based on fair market value.

³ Identify your firm's principal export markets: _____.

II-5a. Imports: #ctrysubA.--Continued

RECONCILIATION OF SHIPMENTS, IMPORTS, AND INVENTORIES.--Generally, the data reported for the end-of-period inventories (i.e., line L) should be equal to the beginning-of-period inventories (i.e., line A), plus imports (i.e., line B), less total shipments (i.e., lines D, F, H, and J). Please ensure that any differences are not due to data entry errors in completing this form, but rather actually reflect your firm's records; and also provide any likely explanations for any differences (e.g., theft, loss, damage, record systems issues, etc.) if they exist.

| Reconciliation | Calendar year | | | | | | January-#intmonth | |
|--|---------------|------|------|------|------|------|-------------------|------|
| | 2017 | 2018 | 2019 | 2020 | 2021 | 2022 | 2022 | 2023 |
| A + B – D – F – H – J – L = should equal zero ("0") or provide an explanation. ¹ | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| ¹ Explanation if the calculated fields above are returning values other than zero (i.e., "0") but are nonetheless accurate: _____. | | | | | | | | |

II-5b. Channels of distribution: #CTRYSUBA-- Report your firm's U.S. shipments (i.e. inclusive of commercial U.S. shipments, internal consumption, and transfers to related firms) of imports from #ctrysuba by channel of distribution in the specified period.

| Item | Calendar year | | | | | | January-#intmonth | |
|---|---------------|------|------|------|------|------|-------------------|------|
| | 2017 | 2018 | 2019 | 2020 | 2021 | 2022 | 2022 | 2023 |
| Quantity (in #units) | | | | | | | | |
| Channels of distribution: U.S. shipments-- to distributors (M) | | | | | | | | |
| to end users (N) | | | | | | | | |

RECONCILIATION OF CHANNELS.--Please ensure that the quantities reported for channels of distribution (i.e., lines M and N) in each time period equal the quantity reported for U.S. shipments (i.e., line D, F, and H) in each time period. If the calculated fields below return values other than zero (i.e., "0"), the data reported must be revised prior to submission to the Commission.

| Reconciliation | Calendar year | | | | | | January-#intmonth | |
|--|---------------|------|------|------|------|------|-------------------|------|
| | 2017 | 2018 | 2019 | 2020 | 2021 | 2022 | 2022 | 2023 |
| M + N – D – F – H = zero ("0"), if not revise. | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

[Include II-5c for all subsequent (second and beyond) full reviews which collect data for only **THREE** years plus any relevant interim period in the main trade tables. **Note**—also request value data if used as primary volume measure in prior investigations.]

II-5c. **Historical U.S. imports: #ctrysubA.** --Report the quantity and value your firm's imports of #abbrproduct imported from #ctrysubA during the specified periods.

| Quantity (in #units) | | | |
|---|-------------|-------------|-------------|
| Item | 2017 | 2028 | 2029 |
| U.S. imports: <i>Quantity</i> | | | |
| <i>Value</i> | | | |

II-6a. **Imports: All other sources.**--Report your firm's imports and your firm's shipments and inventories of #abbrproduct imported from **all other sources** during the specified periods.

ALL OTHER SOURCES

(list sources: _____)

| Quantity (in #units), value (in \$1,000) | | | | | | | | |
|---|---------------|------|------|------|------|------|-------------------|------|
| Item | Calendar year | | | | | | January-#intmonth | |
| | 2017 | 2018 | 2019 | 2020 | 2021 | 2022 | 2022 | 2023 |
| Beginning-of-period inventories (quantity) (A) | | | | | | | | |
| Imports: ¹ | | | | | | | | |
| Quantity (B) | | | | | | | | |
| Value (C) | | | | | | | | |
| U.S. shipments: | | | | | | | | |
| Commercial shipments: | | | | | | | | |
| Quantity (D) | | | | | | | | |
| Value (E) | | | | | | | | |
| Internal consumption: ² | | | | | | | | |
| Quantity (F) | | | | | | | | |
| Value ² (G) | | | | | | | | |
| Transfers to related firms: ² | | | | | | | | |
| Quantity (H) | | | | | | | | |
| Value ² (I) | | | | | | | | |
| Export shipments: ³ | | | | | | | | |
| Quantity (J) | | | | | | | | |
| Value (K) | | | | | | | | |
| End-of-period inventories: (quantity) (L) | | | | | | | | |

¹ Please identify the foreign producers, if known: _____.

² Internal consumption and transfers to related firms must be valued at fair market value. If your firm uses a different basis for valuing these transactions in your records, please specify that basis (e.g., cost, cost plus, etc.): _____. However, the data provided above in this table should be based on fair market value.

³ Identify your firm's principal export markets: _____.

II-6a. Imports: All other sources.--Continued

RECONCILIATION OF SHIPMENTS, IMPORTS, AND INVENTORIES.--Generally, the data reported for the end-of-period inventories (i.e., line L) should be equal to the beginning-of-period inventories (i.e., line A), plus imports (i.e., line B), less total shipments (i.e., lines D, F, H, and J). Please ensure that any differences are not due to data entry errors in completing this form, but rather actually reflect your firm's records; and also provide any likely explanations for any differences (e.g., theft, loss, damage, record systems issues, etc.) if they exist.

| Reconciliation | Calendar year | | | | | | January-#intmonth | |
|--|---------------|------|------|------|------|------|-------------------|------|
| | 2017 | 2018 | 2019 | 2020 | 2021 | 2022 | 2022 | 2023 |
| A + B - D - F - H - J - L = should equal zero ("0") or provide an explanation. ¹ | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| ¹ Explanation if the calculated fields above are returning values other than zero (i.e., "0") but are nonetheless accurate: _____. | | | | | | | | |

II-6b. Channels of distribution: All other sources--Report your firm's U.S. shipments (i.e. inclusive of commercial U.S. shipments, internal consumption, and transfers to related firms) of imports from all other sources by channel of distribution in the specified period.

| Item | Calendar year | | | | | | January-#intmonth | |
|---|---------------|------|------|------|------|------|-------------------|------|
| | 2017 | 2018 | 2019 | 2020 | 2021 | 2022 | 2022 | 2023 |
| Quantity (in #units) | | | | | | | | |
| Channels of distribution: | | | | | | | | |
| U.S. shipments-- to distributors (M) | | | | | | | | |
| to end users (N) | | | | | | | | |

RECONCILIATION OF CHANNELS.--Please ensure that the quantities reported for channels of distribution (i.e., lines M and N) in each time period equal the quantity reported for U.S. shipments (i.e., line D, F, and H) in each time period. If the calculated fields below return values other than zero (i.e., "0"), the data reported must be revised prior to submission to the Commission.

| Reconciliation | Calendar year | | | | | | January-#intmonth | |
|--|---------------|------|------|------|------|------|-------------------|------|
| | 2017 | 2018 | 2019 | 2020 | 2021 | 2022 | 2022 | 2023 |
| M + N - D - F - H = zero ("0"), if not revise. | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

[Include II-5c for all subsequent (second and beyond) full reviews which collect data for only THREE years plus any relevant interim period in the main trade tables. Note—also request value data if used as primary volume measure in prior investigations.]

II-5c. **Historical U.S. imports: All other sources.** --Report the quantity and value your firm's imports of #abbrproduct imported from #abbrproduct during the specified periods.

| Quantity (in #units) | | | |
|---|-------------|-------------|-------------|
| Item | 2017 | 2018 | 2019 |
| U.S. imports: <i>Quantity</i> | | | |
| <i>Value</i> | | | |

For questions II-7 and II-8, if your firm's response differs for particular orders, please indicate and explain the particular effect of imposition and/or revocation of specific orders.

II-7. **Effect of order(s).**--Describe the significance of the existing **countervailing duty/antidumping duty** order covering imports of #abbrproduct from #ctrysubs in terms of its effect on your firm's imports, U.S. shipments of imports, and inventories. You may wish to compare your firm's operations before and after the imposition of the order(s).

II-8. **Likely impact of revocation.** --Would your firm anticipate any changes in the character of its operations or organization, including its imports, U.S. shipments of imports, or inventories of #abbrproduct in the future if the **countervailing duty/antidumping duty** orders on #abbrproduct from #ctrysubs were to be revoked?

| | | |
|--------------------------|--------------------------|---|
| | | If yes, supply details as to the time, nature, and significance of such changes and provide underlying assumptions, along with relevant portions of business plans or other supporting documentations that address this issue. |
| No | Yes | |
| <input type="checkbox"/> | <input type="checkbox"/> | |

II-9. **Transfers to related firms.**--If your firm reported transfers to related firms in any of the data tables in Part II, please identify the firm(s) and indicate the nature of the relationship between your firm and the related firms (e.g., joint venture, wholly owned subsidiary) and whether the transfers were priced at market value or by a non-market formula.

II-10. **Other explanations.**--If your firm would like to further explain a response to a question in Part II for which a narrative box was not provided, please note the question number and the explanation in the space provided below. Please also use this space to highlight any issues your firm had in providing the data in this section.

PART III.--PRICING AND MARKET FACTORS

Further information on this part of the questionnaire can be obtained from **Economist** (202-xxx-xxxx, **NAME@usitc.gov**).

III-1. **Contact information.**--Please identify the responsible individual and the manner by which Commission staff may contact that individual regarding the confidential information submitted in Part III.

| | |
|-----------|--|
| Name | |
| Title | |
| Email | |
| Telephone | |

PRICE DATA

III-2. This question requests quarterly quantity and value data for your firm's commercial shipments to unrelated U.S. customers of the following products your firm imported from #ctrysubs:

Product 1.--DEFINE

Product 2.--DEFINE

Product 3.--DEFINE

Product 4.--DEFINE

Please note that values should be **f.o.b., U.S. point of shipment** and should not include U.S.-inland transportation costs. Values should reflect the *final net* amount paid to your firm (i.e., should be net of all deductions for discounts or rebates).

(a) During January #bopyear-#intmonth YEAR, did your firm import from #ctrysubs and sell to unrelated U.S. customers any of the above listed products (or any products that were competitive with these products)?

| | |
|--------------------------|---|
| <input type="checkbox"/> | Yes. --Please complete the following pricing data table(s) as appropriate. |
| <input type="checkbox"/> | No. --Skip to question III-3. |

III-2b. **Price data (#ctrysubA).**--Report below the quarterly price data¹ for pricing products² imported from #ctrysubA and sold by your firm. **Duplicate (copy and paste) these tables for each subject country and delete this note.**

#ctrysubA

Report data in actual UNITS and actual dollars (not 1,000s).

| (Quantity in SPECIFY, value in dollars) | | | | | | | | |
|---|-----------|-------|-----------|-------|-----------|-------|-----------|-------|
| Period of shipment | Product 1 | | Product 2 | | Product 3 | | Product 4 | |
| | Quantity | Value | Quantity | Value | Quantity | Value | Quantity | Value |
| 2017: | | | | | | | | |
| January-March | | | | | | | | |
| April-June | | | | | | | | |
| July-September | | | | | | | | |
| October-December | | | | | | | | |
| 2018: | | | | | | | | |
| January-March | | | | | | | | |
| April-June | | | | | | | | |
| July-September | | | | | | | | |
| October-December | | | | | | | | |
| 2019: | | | | | | | | |
| January-March | | | | | | | | |
| April-June | | | | | | | | |
| July-September | | | | | | | | |
| October-December | | | | | | | | |
| 2020: | | | | | | | | |
| January-March | | | | | | | | |
| April-June | | | | | | | | |
| July-September | | | | | | | | |
| October-December | | | | | | | | |
| 2021: | | | | | | | | |
| January-March | | | | | | | | |
| April-June | | | | | | | | |
| July-September | | | | | | | | |
| October-December | | | | | | | | |
| 2022: | | | | | | | | |
| January-March | | | | | | | | |
| April-June | | | | | | | | |
| July-September | | | | | | | | |
| October-December | | | | | | | | |

¹ Net values (i.e., gross sales values less all discounts, allowances, rebates, prepaid freight, and the value of returned goods), f.o.b. your firm's U.S. point of shipment. Please subtract any discounts, rebates, and returns from the quarter in which the sale occurred.

² Pricing product definitions are provided on the first page of Part III.

Note.--If your firm's product does not exactly meet the product specifications but is competitive with the specified product, provide a description of the product. Also, please explain any anomalies in your firm's reported pricing data.

Product 1:

Product 2:

Product 3:

Product 4:

III-2c. **Price data checklist.**--Please check that the pricing data in question III-2(b) has been correctly reported.

| Are the price data reported above: | v if Yes |
|--|--------------------------|
| In actual dollars (not \$1,000) and actual #units? | <input type="checkbox"/> |
| F.o.b. U.S. point of shipment (i.e., does not include U.S. inland transportation costs)? | <input type="checkbox"/> |
| Net of all discounts and rebates? | <input type="checkbox"/> |
| Have discounts, rebates, and returns been deducted from gross sales in the quarter in which the sale occurred? | <input type="checkbox"/> |
| Quantities do not exceed commercial shipments reported in part II in each year? | <input type="checkbox"/> |
| Explanation(s) for any boxes not checked: | |

III-2d. **Pricing data methodology.**--Please describe the method and the kinds of documents/records that were used to compile your price data.

Note: As requested in Part I of this questionnaire, please keep all supporting documents/records used in the preparation of the price data, as Commission staff may contact your firm regarding questions on the price data. The Commission may also request that your company submit copies of the supporting documents/records (such as sales journal, invoices, etc.) used to compile these data.

III-3. **Price setting.**--How does your firm determine the prices that it charges for sales of #abbrproduct (check all that apply)?

| Transaction by transaction | Contracts | Set price lists | Other | If other, describe |
|----------------------------|--------------------------|--------------------------|--------------------------|--------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

III-4. **Discount policy.**--Please indicate and describe your firm's discount policies (check all that apply).

| Quantity discounts | Annual total volume discounts | No discount policy | Other | Describe |
|--------------------------|-------------------------------|--------------------------|--------------------------|----------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

III-5. **Pricing terms.**--On what basis are your firm's prices of imported #abbrproduct from #ctrysubs usually quoted? (check one)

| Delivered | F.o.b. | If f.o.b., specify point |
|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | |

III-6. **Contract versus spot.**-- Approximately what shares of your firm's sales of its #abbrproduct imported from #ctrysubs in #termyear were on the basis of (1) short-term contracts, (2) annual contracts, (3) long-term contracts, and (4) spot sales?

| | Type of sale | | | | Total (should sum to 100.0%) |
|-------------------------------|--|--|---|------------------------------------|------------------------------|
| | Short-term contracts (multiple deliveries for less than 12 months) | Annual contracts (multiple deliveries for 12 months) | Long-term contracts (multiple deliveries for more than 12 months) | Spot sales (for a single delivery) | |
| Share of your #termyear sales | % | % | % | % | 0.0 % |

III-7. **Contract provisions.**— Please fill out the table regarding your firm’s typical sales contracts for #abbrproduct imported from #ctrysubs (or check “not applicable” if your firm does not sell on a short-term, annual and/or long-term contract basis).

| Typical sales contract provisions | Item | Short-term contracts (multiple deliveries for less than 12 months) | Annual contracts (multiple deliveries for 12 months) | Long-term contracts (multiple deliveries for more than 12 months) |
|--|--------------------|--|--|---|
| Average contract duration | <i>No. of days</i> | | 365 | |
| Price renegotiation (during contract period) | <i>Yes</i> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | <i>No</i> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Fixed quantity and/or price | <i>Quantity</i> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | <i>Price</i> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | <i>Both</i> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Indexed to raw material costs ¹ | <i>Yes</i> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | <i>No</i> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Not applicable | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| ¹ Please identify the indexes used: | | | | |

III-8. **Lead times.**-- What is your firm’s share of sales of its imported #abbrproduct from inventory and produced to order, and the typical lead time between a customer’s order and the date of delivery for your firm’s sales of its imported #abbrproduct?

| Source | Share of #termyear sales | Lead time (average number of days) |
|---------------------------------------|---------------------------------|---|
| From inventory | % | |
| From foreign manufacturers’ inventory | % | |
| Produced to order | % | |
| Total (should sum to 100.0%) | 0.0 % | |

III-9. Shipping information.--

- (a) Who generally arranges the transportation to your firm's customers' locations?
 Your firm Purchaser (*check one*)

- (b) When your firm sells #abbrproduct imported from #ctrysubs, from where is it shipped?
 Point of importation Storage facility (*check one*)

- (c) Indicate the approximate percentage of your sales of #abbrproduct imported from #ctrysubs that are delivered the following distances from your firm's U.S. point of shipment.

| Distance from your firm's U.S. point of shipment | Share |
|--|-------|
| Within 100 miles | % |
| 101 to 1,000 miles | % |
| Over 1,000 miles | % |
| Total (should sum to 100.0%) | 0.0 % |

- III-10. **Geographical shipments.**--In which U.S. geographic market area(s) has your firm sold #abbrproduct imported from subject countries since January 1, #bopyear (check all that apply)?

| Geographic area | #ctrysubA | #ctrysubB |
|---|--------------------------|--------------------------|
| Northeast. --CT, ME, MA, NH, NJ, NY, PA, RI, and VT. | <input type="checkbox"/> | <input type="checkbox"/> |
| Midwest. --IL, IN, IA, KS, MI, MN, MO, NE, ND, OH, SD, and WI. | <input type="checkbox"/> | <input type="checkbox"/> |
| Southeast. --AL, DE, DC, FL, GA, KY, MD, MS, NC, SC, TN, VA, and WV. | <input type="checkbox"/> | <input type="checkbox"/> |
| Central Southwest. --AR, LA, OK, and TX. | <input type="checkbox"/> | <input type="checkbox"/> |
| Mountains. --AZ, CO, ID, MT, NV, NM, UT, and WY. | <input type="checkbox"/> | <input type="checkbox"/> |
| Pacific Coast. --CA, OR, and WA. | <input type="checkbox"/> | <input type="checkbox"/> |
| Other. --All other markets in the United States not previously listed, including AK, HI, PR, and VI. | <input type="checkbox"/> | <input type="checkbox"/> |

- III-11. **Inland transportation costs.**--What is the approximate percentage of the cost of #abbrproduct imported from #ctrysubs that is accounted for by U.S. inland transportation costs? _____ percent.

- III-12. **End uses.**--Have there been any changes in the end uses of #abbrproduct since January 1, #bopyear or do you anticipate any future changes?

| No | Yes | If yes, explain the changes, noting when these changes occurred or are expected to occur. |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | |

III-13. **Substitutes.**-- Have there been any changes in the number or types of products that can be substituted for #abbrproduct since January 1, #bopyear or do you anticipate any future changes?

| No | Yes | If yes, explain the changes, noting when these changes occurred or are expected to occur. |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | |

III-14. **Availability of supply.**--Has the availability of #abbrproduct in the U.S. market changed since January 1, #bopyear? Do you anticipate any future changes?

| Availability in the U.S. market | No | Yes | Please explain, noting the countries and reasons for the changes. |
|---|--------------------------|--------------------------|---|
| Changes since January 1, #bopyear: | | | |
| U.S.-produced product | <input type="checkbox"/> | <input type="checkbox"/> | |
| Imports from #ctrysubs | <input type="checkbox"/> | <input type="checkbox"/> | |
| Imports from all other countries | <input type="checkbox"/> | <input type="checkbox"/> | |
| Anticipated changes: | | | |
| U.S.-produced product | <input type="checkbox"/> | <input type="checkbox"/> | |
| Imports from #ctrysubs | <input type="checkbox"/> | <input type="checkbox"/> | |
| Imports from all other countries | <input type="checkbox"/> | <input type="checkbox"/> | |

III-15. **Demand trends.**--Indicate how demand within the United States and outside of the United States (if known) for #abbrproduct has changed since January 1, #bopyear, and how you anticipate demand will change in the future. Explain any trends and describe the principal factors that have affected, and that you anticipate will affect, these changes in demand.

| Market | Overall increase | Fluctuate up | No change | Fluctuate down | Overall decrease | Explanation and factors |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-------------------------|
| Demand since January 1, #bopyear | | | | | | |
| Within the United States | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Outside the United States | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Anticipated future demand | | | | | | |
| Within the United States | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Outside the United States | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

III-16. **Product changes.**--Have there been any significant changes in the product range, product mix, or marketing of #abbrproduct since January 1, #bopyear or do you anticipate any future changes?

| No | Yes | If yes, please describe, noting when these changes occurred or are expected to occur. |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | |

III-17. **Business cycles.**--Is the #abbrproduct market subject to business cycles, either during the year or across years? If yes, describe.

| No | Yes | If yes, please describe, including any changes since January 1, #bopyear. |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | |

III-18. **Conditions of competition.**--Is the #abbrproduct market subject to conditions of competition distinctive to #abbrproduct other than the business cycles described in the previous question? If yes, describe.

| No | Yes | If yes, please describe, including any changes since January 1, #bopyear. |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | |

III-19. **Supply constraints.**--Has your firm refused, declined, or been unable to supply #abbrproduct since January 1, #bopyear (examples include placing customers on allocation or "controlled order entry," declining to accept new customers or renew existing customers, delivering less than the quantity promised, being unable to meet timely shipment commitments, etc.)?

| No | Yes | If yes, please describe. |
|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | |

III-20. **Raw materials.**-- Indicate how #abbrproduct raw material prices have changed since January 1, #bopyear, and how you expect they will change in the future.

| Raw materials prices | Overall increase | No change | Overall decrease | Fluctuate with no clear trend | Explain, noting how raw material price changes have affected your firm's selling prices for #abbrproduct. |
|-----------------------------------|--------------------------|--------------------------|--------------------------|-------------------------------|---|
| Changes since January 1, #bopyear | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Anticipated changes | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

III-21. **Price comparisons.**--Are you aware of prices of #abbrproduct in non-U.S. markets? If yes, please compare market prices of #abbrproduct in U.S. and non-U.S. markets. Provide information as to time periods and regions for any price comparisons and note the sources for your market knowledge.

| No | Yes | If yes, please describe. |
|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | |

III-22. **Interchangeability.**—How often is #abbrproduct produced in the United States and in other countries interchangeable (i.e., can they physically be used in the same applications)?

Please indicate A, F, S, N, or O in the table below:

A = the products from a specified country-pair are *always* interchangeable

F = the products are *frequently* interchangeable

S = the products are *sometimes* interchangeable

N = the products are *never* interchangeable

O = *no familiarity* with products from a specified country-pair

| Country-pair | #ctrysubA | #ctrysubB | #ctrysubC | Other countries |
|---|-----------|-----------|-----------|-----------------|
| United States | | | | |
| #ctrysubA | X | | | |
| #ctrysubB | X | X | | |
| #ctrysubC | X | X | X | |
| For any country-pair producing #abbrproduct that is <i>sometimes</i> or <i>never</i> interchangeable, identify the country-pair and explain the factors that limit or preclude the interchangeable use of #abbrproduct produced in the countries: | | | | |

III-23. **Factors other than price.**—How often are differences other than price (e.g., quality, availability, transportation network, product range, technical support, etc.) between #abbrproduct produced in the United States and in other countries a significant factor in your firm's sales of the products?

Please indicate A, F, S, N, or O in the table below:

A = such differences are *always* significant

F = such differences are *frequently* significant

S = such differences are *sometimes* significant

N = such differences are *never* significant

O = *no familiarity* with products from a specified country-pair

| Country-pair | #ctrysubA | #ctrysubB | #ctrysubC | Other countries |
|--|-----------|-----------|-----------|-----------------|
| United States | | | | |
| #ctrysubA | X | | | |
| #ctrysubB | X | X | | |
| #ctrysubC | X | X | X | |
| <p>For any country-pair for which factors other than price are <i>always</i> or <i>frequently</i> a significant factor in your firm's sales of #abbrproduct, identify the country-pair the relevant factors other than price, and report the advantages or disadvantages imparted by such factors:</p> | | | | |

III-24. **Role of section 301 tariffs.**-- Did the tariffs on Chinese-origin products under section 301, or changes in these tariffs, have an impact on the #abbrproduct market in the United States, including any effects on #abbrproduct cost, price, supply, and/or demand, since January 1, #bopyear?

| | | |
|---|-----------------------------------|---|
| Yes — Please indicate the impact in the table below. | No — Skip to next question | Don't know — Skip to next question |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| Factor | Overall increase | No change | Overall decrease | Fluctuate with no clear trend | Explain, noting how the imposition of tariffs under section 301 affected each factor of the #abbrproduct market in the United States. |
|--|--------------------------|--------------------------|--------------------------|-------------------------------|---|
| Supply of U.S.-produced #abbrproduct | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Supply of #abbrproduct imported from China | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Supply of #abbrproduct imported from other countries | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Prices for #abbrproduct | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Overall U.S. demand for #abbrproduct | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Raw material costs for #abbrproduct | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

III-25. **Role of section 232 measures.**—Did the measures (e.g., tariffs, quotas, etc.) on imported steel/aluminum products under section 232, or changes in the measures (such as the level, coverage, or nature of the measures), have an impact on the #abbrproduct market in the United States, including any effects on #abbrproduct cost, price, supply, and/or demand, since January 1, #bopyear?

| | | |
|--|-----------------------------------|---|
| Yes— Please indicate the impact in the table below. | No— Skip to next question. | Don't know— Skip to next question. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| Factor | Overall increase | No change | Overall decrease | Fluctuate with no clear trend | Explain, noting how the imposition of tariffs under section 301 affected each factor of the #abbrproduct market in the United States. |
|--------------------------------------|--------------------------|--------------------------|--------------------------|-------------------------------|---|
| Supply of U.S.-produced #abbrproduct | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Supply of imported #abbrproduct | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Prices for #abbrproduct | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Overall U.S. demand for #abbrproduct | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Raw material costs for #abbrproduct | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

III-26. **Other explanations.**--If your firm would like to further explain a response to a question in Part III for which a narrative box was not provided, please note the question number and the explanation in the space provided below. Please also use this space to highlight any issues your firm had in providing the data in this section.

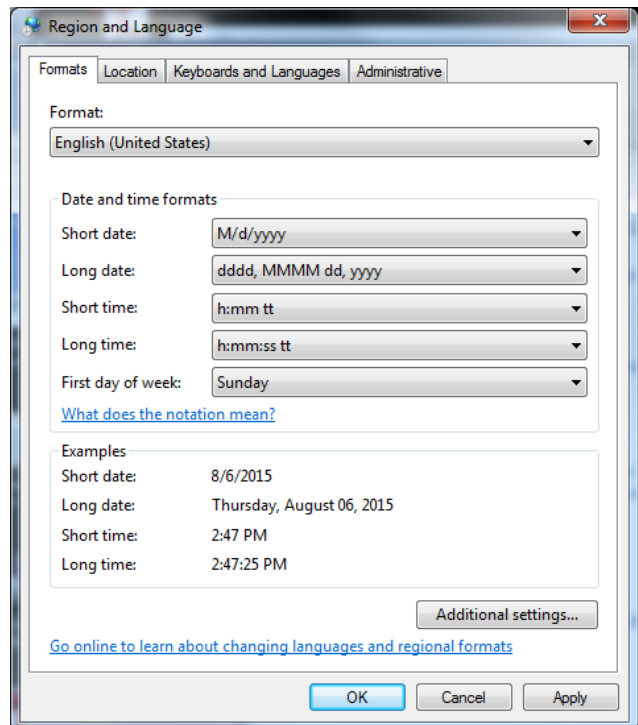
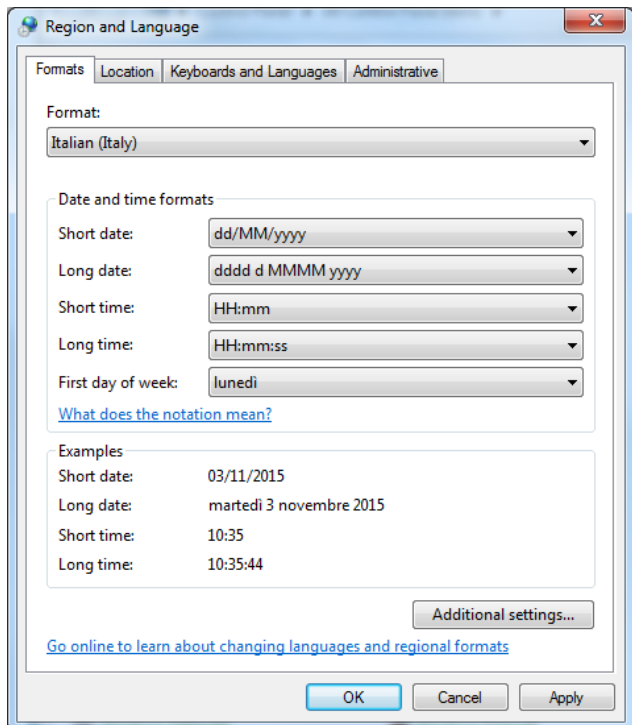
Correcting Valid number error messages.--If you are completing a Commission questionnaire in a country that uses periods (".") to delineate multiples of 1000 (e.g., one million would appear as \$1.000.000 instead of as \$1,000,000), you may be unable to enter in numbers greater than 999 in numeric form fields. This issues stem from your computer number formatting setting (e.g., not the MS Word document itself, but the computer from which you are opening up the document). In the United States commas (,) delineate multiples of 1000 and periods (.) delineate fractions less than one. Many EU countries use the reverse where multiples of 1000 are delineated with periods (.) and fractions less than one are delineated with commas (,). The U.S. International Trade Commission's questionnaires are set-up in the United States with the U.S. number formatting. When this formatting interacts with a computer set to EU number formatting, we believe this may cause this issue.

The solution to this data entry issue is to temporarily change your operating system's number formatting to be consistent with the U.S. number formatting system while you complete the questionnaire.

To temporarily change your computer's number settings to U.S. settings, please do the following (for Microsoft Windows Operating system):

- START
- Control Panel
- Region and Language (under Clock, Language, and Region category)
- Format tab
- Change the Format from your existing one (e.g. "Italian (Italy)") to "English (United States)" (see screen shots below)

When you do this the number "twelve million dollars and thirty-five cents" would change from \$12.000.000,35 (Italy format) to \$12,000,000.35 (U.S. format), and then there will be no conflict with the questionnaire. When you finish reporting the data then you can close the questionnaire and switch back to Italy settings.



HOW TO FILE YOUR QUESTIONNAIRE RESPONSE

This questionnaire is available as a “fillable” form in MS Word format on the Commission’s website at: [LINK](#)

Please do not attempt to modify the format or permissions of the questionnaire document. Please submit the completed questionnaire using one of the methods noted below. If your firm is unable to complete the MS Word questionnaire or cannot use one of the electronic methods of submission, please contact the Commission for further instructions.

- **Upload via Secure Drop Box.**—Upload the MS Word questionnaire along with a scanned copy of the signed certification page (page 1) through the Commission’s secure upload facility:

Web address: <https://dropbox.usitc.gov/oinv/> **Pin:** XXXX

- **E-mail.**—E-mail the MS Word questionnaire to NAME@usitc.gov; include a scanned copy of the signed certification page (page 1). *Submitters are strongly encouraged to encrypt nonpublic documents that are electronically transmitted to the Commission to protect your sensitive information from unauthorized disclosure. The USITC secure drop-box system and the Electronic Document Information System (EDIS) use Federal Information Processing Standards (FIPS) 140-2 cryptographic algorithms to encrypt data in transit. Submitting your nonpublic documents by a means that does not use these encryption algorithms (such as by email) may subject your firm’s nonpublic information to unauthorized disclosure during transmission. If you choose a non-encrypted method of electronic transmission, the Commission warns you that the risk of such possible unauthorized disclosure is assumed by you and not by the Commission.*

If your firm does not import this product, please fill out page 1, print, sign, and submit a scanned copy to the Commission.

Parties to this proceeding.—If your firm is a party to this proceeding, it is required to serve a copy of the completed questionnaire on parties to the proceeding that are subject to administrative protective order (see 19 CFR § 207.7). A list of such parties may be obtained from the Commission’s Secretary (202-205-1802). A certificate of service must accompany the completed questionnaire you submit (see 19 CFR § 207.7). Service of the questionnaire must be made in paper form.