Form Approved. OMB No. 0625-0036

FORM ITA-6051P
(REV. 5-83)

U.S. DEPARTMENT OF COMMERCE
INTERNATIONAL TRADE ADMINISTRATION

THIS SPACE FOR BTR USE 764281

A BATCH 69KO

MONTH/YEAR 1298

REPORT OF REQUEST FOR RESTRICTIVE TRADE PRACTICE OR BOYCOTT
MULTIPLE TRANSACTIONS (Sheet No. 1)

(For reporting requests described in Part 369 of the Export Administration Regulations)

Pursuant to Section 4A (b) (2) of the Export Administration Act of 1969, as amended (50 U.S.C. App. 2401 *et. seq.*), information regarding the quantity, description, and value of any articles, materials and supplies, including technical data and other information, to which this report relates will be kept confidential when the reporting person certifies that disclosure would place a United States person involved at a competitive disadvantage, unless the Secretary of Commerce determines that disclosure thereof would not place such United States person at a competitive disadvantage or that it would be contrary to the national interest to withhold the information.

This report is required by law (50 U.S.C. App. §2403-1a(b); P.L. 95-52; E.O. 12002; 15 CFR Part 369). Failure to report can result both in criminal penalties, including fines or imprisonment, and administrative sanctions.

INSTRUCTIONS: This form may not include a transaction report that is filed late, nor indicate a decision on request other than those coded in Item 4 below. It may be used to report on behalf of another United States person if all transactions apply to the person identified in Item 2, but may not be considered as a dual report on behalf of both persons identified in Item 1a and Item 2. Limit each report to 75 transactions or less. Attach as many continuation sheets as needed. Enter sheet number and name of reporting firm on each continuation sheet (starting with Sheet No. 2). List each transaction across the sheet, completing all items that apply. Use as many lines as necessary, but separate transactions with a blank space or line. Assemble original report forms and accompanying documents as a unit, and submit intact and unaltered. Assemble and submit a duplicate set of report forms and documents, marked with the legend "PUBLIC INSPECTION COPY." *If the reporting firm certifies that disclosure of certain information specified in Item 5 below would result in competitive disadvantage, the public inspection copy (report forms and accompanying documents) must be edited accordingly.*

1a. Identify firm submitting this report:

Name: COMMERCIAL BANK OF KUWAIT
Address: 350 PARK AVENUE
City, State and ZIP: NEW YORK, NY 20022
Country *(if other than USA)*:
Telephone: 212 207 2420
Firm Identification No. *(if known)*: 281931

Specify firm type:
- [ ] Exporter
- [XX] Bank
- [ ] Forwarder
- [ ] Carrier
- [ ] Insurer
- [ ] Other

1b. Check any applicable box:
- [ ] Revision of a previous report (attach two copies of the previously submitted report)
- [ ] Resubmission of a deficient report returned by BTR (attach form letter that was returned with deficient report)
- [ ] Report on behalf of the person identified in Item 2

2. If you are authorized to report and are reporting on behalf of another U.S. person, identify that person (e.g., domestic subsidiary, controlled foreign subsidiary, exporter, beneficiary):

Name:
Address:
City, State and ZIP:
Country *(if other than USA)*:
Type of firm: ***(see list in item 1a)***
Firm Identification No. *(if known)*:

3. REQUESTING DOCUMENT CODES ***(use to code Column 6 of continuation sheet)***

- C Request to carrier for blacklist certificate (submit two copies of blacklist certificate or transcript of request)
- U Unwritten, not otherwise provided for (make transcript of request and submit two copies)
- L Letter of credit
- R Requisition/purchase order/accepted contract/shipping instruction
- B Bid invitation/tender/proposal/trade opportunity
- Q Questionnaire (not related to a particular dollar value transaction)
- 9 Other written

} Submit two copies of each document or relevant page in which the request appears.

Ad 10-08-98

4. DECISION ON REQUEST CODES ***(use to code Column 7 of continuation sheet)***

- R Have not taken and will not take the action requested
- T Have taken or will take the action requested

5. Unless indicated otherwise by checkmark in the box below, I(we) certify that disclosure to the public of the information regarding quantity, description, and value of the commodities or technical data contained in the attached continuation sheets would place a United States person involved at a competitive disadvantage, and I(we) request that it be kept confidential. I(We) certify that all statements and information contained in this report are true and correct to the best of my(our) knowledge and belief.

Sign here in ink _____ (Signature of person completing report)

Type or print GEORGE KOWALIWSKYJ VP/OPERATIONS MANAGER MIKE BATRA LETTER OF CREDIT MANAGER (Name and title of person whose signature appears on line to left)

Date OCTOBER 8, 1998.

[ ] I(We) authorize public release of all information contained in this report.

DUPLICATE (PUBLIC INSPECTION COPY) - Submit to Office of Antiboycott Compliance, Room 3893, U.S. Department of Commerce, Washington, D.C. 20230

USCOMM-DC 83-21597

Form Approved: OMB No. 0625-0036

Column (2) Also enter firm identification number assigned to exporting firm, if known.
(6) Use codes found on Sheet No. 1 to specify type(s) of document conveying the request.
(7) Use codes found on Sheet No. 1 to indicate whether action taken or not taken.
(8) Enter reporting firm's reference number (e.g., letter of credit, customer order, invoice). This number must appear on corresponding copy of document or relevant page. Attach copies in same order as listed on continuation sheet(s).

1998 SHEET NO. 1 3rd Qrter

REPORTING FIRM (Name)

Commercial Bank of Kuwait
New York

FORM ITA-6051P-a
(REV. 5-83)

REPORT OF REQUEST FOR RESTRICTIV
MULTIPLE TRANSACTION

RSN SUBSET RTP/CLASS OTHER PARTY FIN (1)	NAME AND ADDRESS OF EXPORTING FIRM INVOLVED (unless same as Item 1a or Item 2 on Sheet No. 1) (2)	BOYCOTTING COUNTRY (3)	BOYCOTTED COUNTRY OR COUNTRIES (4)	DATE REQUEST RECEIVED BY FIRM (month/day/year) (5)	REQUESTING DOCUMENT CODE (6)	DECISION ON REQUEST CODE (7)	YOUR REFERENCE NUMBER (8)
THIS SPACE FOR BTR USE	Wheaton Science Products 1501 10th Street Millville, NJ 08332-2093	Kuwait	Israel	7.17.98	L	T	07703

(Remove stub from public inspection copy at perforation if confidentiality is requested in Sheet No. 1)

DUPLICATE (PUBLIC INSPECTION COPY) - Attach to and submit with the duplicate (Public Inspection Copy) of Sheet No. 1 (ITA-6051P)

CENTRAL BANK OF KUWAIT
P.O.Box 526, 13006, Safat - Kuwait
Telex: 22101 / 22118 / 22173 / 44880 - KT
Telephone: 244 9200 - 20
Cable: 'KUMBANK' Swift: CBKKU KW KW

Date [illegible]

IRREVOCABLE

Credit No. 4/102/045667/98

Amount [redacted]
[redacted] ONLY
****
****

Applicant KUWAIT UNIVERSITY

Advising Bank

COMMERCIAL BANK OF KUWAIT/N.Y.
350, PARK AVENUE,
NEW YORK, NY-10022,
U.S.A.

COMBUS33

Beneficiary

WHEATON SCIENCE PRODUCTS,
1501 N 10TH ST., MILLVILLE,
NJ 08332-2093, U.S.A.

COMMERCIAL BANK OF KUWAIT 07703 NEW YORK BRANCH

Expiry Date 30/10/98
At the counters of advising bank

Dear Sirs,

We hereby issue in your favour this documentary credit which is available against sight draft(s) without recourse drawn on the Accreditors and accompanied by the following documents (original should be sent to us by registered air mail and duplicate by subsequent air mail):

(X) Signed commercial invoices in 5 COPIES. (X) Packing lists in 5 COPIES.
(X) Weight lists in 5 COPIES.
(X) Certificate of origin in 2 copies indicating the name and nationality of the manufacturers / producers
(X) Carriers's receipts/Shipping Agent's certified invoices showing actual freight paid.
( ) Complete set of clean "On Board" "Ocean Bills of Lading", issued to the order of the beneficiaries and blank endorsed marked "NOTIFY BUYERS" and evidencing "FREIGHT PREPAID".
(X) Air waybills in the Accreditors name evidencing "FREIGHT PREPAID" and quoting our Credit Number, Flight number and date. Shipment preferably by Kuwait Airways Corporation.
( ) Road waybills in the Accreditors' name evidencing "FREIGHT PREPAID" and quoting our Credit Number.
( ) Air/Sea Parcel Post receipts evidencing goods consigned to the Accreditors and quoting our Credit Number.
( ) Insurance Policy/Certificate for the full invoices value plus 10% covering air/marine cargo clause all risks, war & SRCC clauses all risks. ( ) Insurance Premium Receipt.

Covering:- [redacted]

- CREDIT AMOUNT REPRESENTS EX-WORKS VALUE. FURTHER CHARGES TO C3F KUWAIT BY AIRFREIGHT TO BE CLAIMED AND PAID TO THE BENEFICIARIES, IN ADDITION TO THE CREDIT AMOUNT, AGAINST THE ABOVE MENTIONED DOCUMENTS.

1. BENEFICIARIES SHOULD CERTIFY IN THEIR INVOICE THAT THE MERCHANDISE IS IN ACCORDANCE WITH THEIR QUOTATION Q040798-002-MB DATED 7/4/98 AND OPENER'S ORDER NO. 3099/MLD022 FOR RESEARCH M. UNIT.
2. CERTIFICATE OF ORIGIN AND INVOICE SHOULD INDICATE THE MANUFACTURER'S NAME AS WHEATON SCIENCE PRODUCTS - U.S.A. AND/SWITZERLAND AND/JAPAN.
3. INVOICES AND CERTIFICATE OF ORIGIN DULY LEGALISED SHOULD STATE OPENER'S ORDER NUMBER, NUMBER OF PACKAGES SHIPPED, NET AND GROSS WEIGHT AND MANUFACTURERS NAME AND ADDRESS.
4. A COPY OF INVOICE AND CERTIFICATE OF ORIGIN (NOT PHOTOSTAT) SHOULD BE SENT TO THE OPENERS ALONG WITH THE AIRWAY BILL.
5. INSTRUCTIONS TO ADVISING BANK:
PLEASE ADVISE THIS CREDIT THROUGH CHASE MANHATTAN BANK, NEW YORK. ACCOUNT* NO.400 701138

Each draft accompanying documents must state "Drawn under Credit No. 4/102/045667/98

Shipment to be made on or before 15/10/98 From U.S.A. to KUWAIT	Partial Shipments NOT ALLOWED	Transhipments NOT ALLOWED

Special Conditions:- Transhipment at Israel is PROHIBITED - Insurance not required/~~required~~ XXXXXX

- Through **B/L - AWB** are required in case transhipment is allowed.
- The words: **PERSIAN GULF** should not appear in the address of any of the documents.
- Shipment by Ocean Freight by **United Arab Shipping Company** or its Associates, or Conference Line Vessels only. If unable to comply, a declaration issued by **UASC** or its agents to this effect should be submitted for negotiation.
- Documents incomplete or containing irregularities should not be negotiated without our prior approval.
- House Air waybills not acceptable for negotiation.
- Packing List Must Clearly State: (1) Description Of Goods. (2) Harmonic System Commodity Code Number For Each Item. (3) Number Of Package. (4) Kind Of Packing/Package. (5) Contents Of Package. (6) Gross Weight. (7) Net Weight. (8) Total Cost Of each Item. (Requirement Under No. 8 Is Optional).

FOR FURTHER TERMS AND CONDITIONS PLEASE TURN OVER. ~~XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX~~

We hereby engage that payment will be duly made against documents presented in conformity with the terms and conditions of this credit.

YOUR COMMISSION AND CHARGES, IF ANY, ARE TO BE CLAIMED FROM THE BENEFICIARY.

In reimbursement of your negotiations under this Credit please

DEBIT OUR ACC WITH YOU.

Please acknowledge receipt.

Yours faithfully,
CENTRAL BANK OF KUWAIT

SIGNATURE VERIFIED

Advising bank's notification

SIGNATURE VERIFIED CBK NY

Place date, name and signature of the advising bank.

Except so far as otherwise stated, this documentary credit is subject to the "Uniform Customs and Practice for Documentary Credits" (1993 Revision) International Camber of Commerce (Brochure No. 500).

OTHER TERMS AND CONDITIONS WHICH CONSTITUTE AN INTEGRAL PART OF OUR CREDIT

[redacted] ILD BE PREPARED EITHER IN ARABIC OR ENGLISH LANGUAGE ONLY.

[redacted]

a) The price and net weight expressed in Kilos of each type of goods separately.
b) Name and carrying vessel, if shipment made by sea.
c) Air waybill or Parcel Post Receipt numbers, if goods are despatched by Airfreight or Parce Post.
d) Name and kind of each item shipped as well as the name and nationality of the Manufactures and/or Processors for manufactured or processed goods.

CERTIFICATE OF ORIGIN

To be signed by the Chamber of Commerce and/or Official Trade and/or Industries' Association, stating
a) The country of origin of the goods.
(In the event of the shipment of goods containing foreign materials, the country of origin of these foreign materials must be shown on the Certificate of Origin).
b) Name of the manufacturers and/or producers of the manufactured or produced goods, and the name of the exporters (Beneficiaries) and the name and kind of each item shipped.
If the name of the Manufacturers and/or the Producers of the goods is not shown on the Certificate of Origin, a separate statement may be issued by the beneficiaries at their own responsibility, showing the name of the Manufacturers and/or the Producers of the goods and the relative invoice number. This statement ahould be legalized by a Notary Public and presented along with the signed Certificate of Origin as per the above mentioned clauses.

Notes Concerning the Required Certificate of Origin

a) Importation of goods from 'Israel' is strictrly prohibited by Kuwait Import Regulations. Therefore, Certificates of Origin covering goods originated from the said countries are not acceptable.
b) Certificates of Origin, covering goods of **U.S.A. origin**, issued by firms operating within the state mentioned hereinafter should be signed and/or countersigned as follows:
   1. Within the State of New York and Washington, by American Chamber of Commerce and legalized by an Arab Embassy/Consulate.
   2. Within the State Texas, by the American Arab Chamber of Commerce, 319 World Trade Building, Houston, Texas 77002.
   3. Within the State of California, by U.S. Arab Chamber of Commerce (Pacific) Inc. 777 Jones Street, San Francisco, California 94109.
   4. Within the State of Illinois, by Mid-America Arab Chamber of Commerce, 135 So. Las Salle St., Suite 2050, Chicago, Illinois 60603. [redacted]
   5. Within other States, by any approved American Chamber of Commerce and/or by one of the four Chambers of Commerce mentioned above.
c) Certificates of Origin covering shipment of goods of Rumanian, Greek, Maltese, Italian, Iranian, Kenyan, Turkish, Cypriot, Ethiopian and Hong Kong must be lagalized by Kuwaiti Diplomatic or Consular Mission, if available, or by any other Arab Diplomatic or consular Mission in these countries.
d) Certificate of Origin presented by the beneficiaries in Paris Zone should be legalized by the Chambre de Commerce Franco-Arabe, 138 Boulevard Haussman, Paris 8E - France.
e) Beneficiaries within London Area should get the Certificate of Origin and other documents legalized by Arab-British Chamber of Commerce, P.O. Box 4BL, 42 Berkely Square, London WIX 5DB.
f) Beneficiaries within Brussels Area should get the Certificate of Origin and other docuements legalized by Arab-Belgium-Luxembourg Chamber of Commerce, Rue Mignot-Delstanche 60, B-1060 Brussels.
g) Beneficiaries within 'Bonn Area' should get the Certificate of Origin and other documents legalized by 'Arabisch - Deutsch Vereinigund Chorfa For Handel Und Industrie, Kioper Strasse 125/1, 5300 Bonn Bad Godesberg.
h) Beneficiaries in Netherlands should get the Certificate of Origin and invoice legalized by the Dutch Chamber of Commerce and Industry and authenticated by an Arab Embassy/Consulate.
i) Legalization of Certificate of Origin / any other documents by Egyptian Embassy / Consulate not acceptable.

Additional Documents Required

Bill of Lading should state that the carrying vessel is allowed to enter Kuwaiti Ports. Separate Declaration to that effect from the owner/captain of the vessel is acceptable.
In case of shipment by Aircraft, a similar declaration on the Air waybill is acceptable.
(Declarations for the carrying vessels as well as the aircraft owned by Kuwaiti or Arab companies are not required).

PARTICULARS OF UTILIZATIONS UNDER THIS CREDIT

DATE	NAME OF BANK	AMOUNT IN FIGURES AND WORDS	STAMP/ SIGNATURE
		EXAMINED FOR BOYCOTT REQUISITE Date: 9.11.98 Examiner's Initials: No boycott-related clauses found: Boycott-related clause(s) found and classified as: Prohibited: Permissible: Non-importable: Importable:	