TREASURY DEPARTMENT US CUSTOMS SERVICE

SUPPLEMENTAL DECLARATION FOR UNACCOMPANIED PERSONAL OR HOUSEHOLD EFFECTS

1 OWNER OF HOUSEHOLD GOODS (Last name, first and middle)		
2 DATE OF BIRTH		3 CITIZENSHIP
4 PASSPORT (Country		
5 SOCIAL SECURITY NO		6 RESIDENT ALIEN NUMBER
7 US ADDRESS		8 FOREIGN ADDRESS
9 REASON FOR MOVIN	G	10 EMPLOYER
11 POSITION WITH CO		12 LENGTH OF EMPLOYMENT
13 NATURE OF BUSINE		
		O CAN VERIFY ABOVE INFORMATION
		, PACKERS AND SHIPPING AGENTS
	RY (Specify place of loading and i	ntermediate ports)
	A. Authorized Agents	-
17 SIGNATURE		