

ATTACHMENT

**TREASURY DEPARTMENT
U.S. CUSTOMS SERVICE**

**SUPPLEMENTAL DECLARATION FOR
UNACCOMPANIED PERSONAL AND HOUSEHOLD EFFECTS**

1. OWNER OF HOUSEHOLD GOODS
(LAST NAME, FIRST AND MIDDLE)

2. DATE OF BIRTH

3. CITIZENSHIP

4. PASSPORT NO. (COUNTRY & NUMBER)

5. SOCIAL SECURITY NO.

6. RESIDENT ALIEN NO.

7. U.S. ADDRESS

10. EMPLOYER

8. FOREIGN ADDRESS:

11. POSITION WITH COMPANY:

12. LENGTH OF EMPLOYMENT:

9. REASON FOR MOVING:

13. NATURE OF BUSINESS:

14. NAME AND TELEPHONE NO. OF COMPANY OFFICIAL TO VERIFY THE ABOVE INFORMATION:

15. NAME AND ADDRESS OF FREIGHT FORWARDERS, PACKERS AND SHIPPING AGENTS:

16. SHIPMENT ITINERARY: (SPECIFY PLACE OF LOADING AND INTERMEDIATE PORTS)

17. CERTIFICATE: (CHECK ONE) A. AUTHORIZED AGENT B. IMPORTER

SIGNATURE: _____