

DEPARTMENT OF THE TREASURY
U.S. CUSTOMS SERVICE
NEW YORK REGION
NEW YORK, NEW YORK 10048

**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 (Country and number)

5. SOCIAL SECURITY NO.

6. RESIDENT ALIEN NO.

7. U. S. ADDRESS

10. EMPLOYER

11. POSITION WITH COMPANY

8. FOREIGN ADDRESS

12. LENGTH OF EMPLOYMENT

9. REASON FOR MOVING

13. NATURE OF BUSINESS

14. NAME AND TELEPHONE OF COMPANY
OFFICIAL WHO CAN VERIFY ABOVE INFORMATION

NAME AND ADDRESS OF FREIGHT FORWARDERS:

15. PACKERS AND SHIPPING AGENTS

SHIPMENT ITENERARY

16. (Specify place of loading and intermediate ports)

17. CERTIFICATION A. Authorized Agent B. Importer (check one)

18. SIGNATURE

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