

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 and Number)

.....
5 SOCIAL SECURITY NO

6 RESIDENT ALIEN NUMBER

.....
7 US ADDRESS

8 FOREIGN ADDRESS

.....
9 REASON FOR MOVING

10 EMPLOYER

.....
11 POSITION WITH COMPANY

12 LENGTH OF EMPLOYMENT

.....
13 NATURE OF BUSINESS

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

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

ASCO INC / One Columbus Center / Suite 500/ Virginia Beach, VA 23462

Telephone: (1) (757) 485-0566 ext. 36 / Fax (1) (757) 292-3012

.....
16 SHIPPING ITINERARY (Specify place of loading and intermediate ports)

.....
17 CERTIFICATE

A. Authorized Agents

B. Importer /(check one)

.....
17 SIGNATURE