

**SUPPLEMENTAL DECLARATION TO CF3299 FOR
UNACCOMPANIED AND HOUSEHOLD EFFECTS**

1. Owner of Household Goods/Personal Effects

Last Name

First Name

Middle Initial

2. Date of Birth:

3. Citizen of:

4. Passport No.:

5. Issuing Country:

6. Social Security No.:

7. Resident Alien No.:

8. U.S. Address:

9. Foreign Address:

10. Reason for Moving:

11. Employer Name and Address:

12. Position:

13. Length of Employment in the Foreign Country:

14. Nature of Business:

15. Name and Phone No. of the Company for Verification:

16. Name and Address of Freight Forwarder, Packer and/or Shipping Agent:

17. Shipment Itinerary:

18. Certification of (Check One):

(A) Authorized Agent

(B) Importer

19. Signature:

20. Date:

21. Title