U.S.A. Customs Clearance Documents

The attached set of documents consists of three different forms. First of all, separate the three forms, and then carefully fill them in, paying attention to the notes given below. If you do not fully complete these forms, your goods will not clear Customs, and you may be charged for storage at destination.

Power of Attorney

This form empowers the destination agent to act for you as Customs broker, and to make statements and Customs entries on your behalf. (See also note at bottom of section on completing Customs form 3299).

- Please complete the sections marked (X).
- Leave blank the spaces for naming the Customs broker, Customs district and duration of the validity of the form. These details
 will be entered by the destination agent.
- Don't forget to sign, date, and have the form witnessed.

Customs form 3299

This form is your declaration requesting free entry of your personal effects. The form may seem complicated to begin with, but if you take your time and follow these instructions, you will find it fairly simple to complete. The form is divided into seven sections, numbered Part I through to Part VII.

- Part I Complete boxes 1 to 7. It is important that you fill boxes 3 (date you arrived/will arrive); 5 (airport or place where you arrived/will arrive); and 6 (airline and flight number) correctly. The information you put in these boxes refers to your own arrival, not the arrival of your goods. Box 8 sections A to F refers to the arrival of your goods. As you will not have the necessary information to complete this part, you may leave Box 8 sections A to F blank for the destination agent to complete.
- Part II Fill in Box 9, putting an 'X' in the check-box against 'is' if you are moving temporarily to the US, or in the check-box against 'was' if you are moving permanently. Fill in the boxes marked A (name of country); B (length of time); and C (Residency status on arrival) with the relevant information. In Box 10, note that residents of the U.S. should complete parts A and B; non-residents should complete parts A and C. Put an 'X' in each applicable check-box.
- Part III This part applies only to 'US Personnel and Evacuees.' Complete it only if you are a member of the US Military or a US Government employee, moving on US Government orders. Otherwise, leave this part blank.
- Part IV Section A applies to all importers. If you have any of the items listed by check-boxes 1 to 6, please put an 'X' in the appropriate box. US residents then go on to enter an 'X' against each applicable check-box in sections B and C. Importers who are non-residents must complete section B, but not section C. Turn the page now to section D where you list any items that you indicated to be in your shipment in sections A, B, or C. It is not necessary to list here any items which you have owned and used for over a year, as long as these items are detailed on your packing list (for owner-packed shipments) or on your inventory (for household removals).
- Part V The destination agent will complete the 'Name of carrier' and 'Signature of Agent' boxes
- Part VI Put an 'X' in the 'Importer' check box, sign the form in box 2, and date it in box 3.
- Part VII Leave blank. This is for Customs' use only.

Note: You may notice that at the bottom of part VI, it is stated that an 'Authorised agent' may complete the form. This is why it is important that you complete the first form, the Power of Attorney. In completing the Power of Attorney, you empower the destination agent to complete any parts you may have missed or filled in incorrectly, using information received from you by mail, fax or telephone.

Treasury Department Supplemental Declaration

On this form, you give details of your passport number, Social security number (if applicable) and brief details of your reason for moving to the United States.

- Enter the correct information in each section. You may leave blank section 16 (Shipment itinerary) the destination agent will have the information to complete this section. Enter 'N/A' if due to your circumstances a particular section is not applicable to you or your shipment.
- Ensure that you sign the form.

You must now attach to these documents a <u>passport photocopy</u>, specifically the page with your picture and personal details, and the page with your US Visa (if applicable). You must also complete and attach a <u>packing list</u> (for owner-packed shipments), <u>or a numbered inventory</u> which the packers will complete if yours is a professionally-packed household removal.

POWER OF ATTORNEY - to clear my personal effects shipment through U.S. Customs

Section 141.5, Title 19, United States Code of Federal Regulations requires a Customs House Broker to obtain a valid Power of Attorney before transacting business in the name of his principal (Importer of Records).

To expedite clearance of your shipment and to comply with U.S. Customs regulations, please complete the information as requested below (X).

KNOW ALL MEN BY THESE PRESENTS: That, (X)			
	(Full name of Shipper)		
Residing at (X)			
(U.S. Address)			
hereby constitutes and appoints the following	g Customs House Broker:		
date and in all Customs Districts, and in no o declaration, certificate, bill of lading, carnet of transportation, or exportation of any merchant	grantor named above for and in the name, place, And stead ther name, to make, endorse, sign, declare, or swear to any ear other document required by law or regulation in connection dise shipped or consigned by or to said grantor; to perform an connection with such merchandise; to receive any merchand	entry, withdrawal, on with the importation, any act or condition	
declare, or swear to any statement, supplement manufacture, certificate of manufacture and centry, declaration of exporter on drawback er	ferring authority to transfer title, make entry or collect draw ntal statement, schedule, supplemental schedule, certificate of delivery, abstract of manufacturing records, declaration of pr ntry, or any other affidavit or document which may be requir r such bill of lading, sworn statement, schedule, certificate, a ling in any customs district;	of delivery, certificate of roprietor on drawback red by law or regulation	
withdrawal of imported merchandise or merc entry, clearance, lading, unlading or navigation and any and all bonds which may be voluntary	f said grantor any bond required by law or regulation in combandise exported with or without benefit of drawback, or in on of any vessel or other means of conveyance owned or oprily given and accepted under applicable Laws and regulatio 485, Tariff Act of 1930, as amended or affidavits in connect	connection with the erated by said grantor, ons, consignee's and	
	erform any act that may be necessary or required by law or re or operation of any vessel or other means of conveyance ow		
of protests under section 514 of the Tariff Ac properly be transacted or performed by an ag anything whatever requisite and necessary to ratifying and confirming all that the said ager attorney to remain in full force and effect unt is duly given to and received by a District Di	es in any district, any and all customs business, including met of 1930, in which said grantor is or may be concerned or intent and attorney, giving to said agent and attorney full power be done in the premises as fully as said grantor could do if put and attorney shall lawfully do by virtue of these presents: fill the day of, 2, or until notice rector of Customs. If the donor of this power of attorney is a cut after the expiration of 2 years from the date of its execution	nterested and which may er and authority to do present and acting, hereby the foregoing power of e of revocation in writing a partnership, the said	
IN WITNESS WHEREOF, the said (X)			
(I	Full name of shipper)		
has caused these presents to be signed (X)	(Signature of Shipper)	X)	
	(Signature of Shipper)		
WITNESSED BY (X) (Witness name)	(X) Witness Signature		
(w mics mame)	withess signature		

FORM APPROVED OMB NO. 1651-0014

U.S. DEPARTMENT OF HOMELAND SECURITY Bureau of Customs and Border Protection

DECLARATION FOR FREE ENTRY OF UNACCOMPANIED ARTICLES

19 CFR 148.6, 148.52, 148.53, 148.77

PAPERWORK REDUCTION ACT NOTICE: This request is in accordance with the Paperwork Reduction Act. We ask for the information in order to carry out the laws and regulations administered by the CBP. These regulations and forms apply to importers to ensure that they are complying with the law and to allow us to figure, collect, or refund the right amount of duty and tax. It is mandatory. The estimated average burden associated with this collection of information is 10 minutes per respondent depending on individual circumstances. Comments concerning the accuracy of this burden estimate and suggestions for reducing this burden should be directed to the Bureau of Customs and Border Protection, Information Services Branch, Washington, DC 20229, and to the Office of Management and Budget, Paperwork Reduction Project (1651-0014), Washington, DC 20503.

PART I TO BE COMPLETED BY ALL PERSONS SEEKING F assistance. REMEMBERAll of your statements are subject.						or
I. IMPORTER'S NAME (Last, first and middle)	2. IMPORTER'S DATE OF BIRTH		3. IMPORTER'S DATE OF ARRIVAL			
Snir, Guy						IVAL
	12/20/1979		07/24/2025			
4. IMPORTER'S U.S. ADDRESS		5. IMPORTER'S PORT	OF ARRIVAL K International	Airport		
251 Central Park West #2A, New York, NY 100	24	6. NAME OF ARRIVING	G VESSEL CARRIER	AND FLIGHT/TF	RAIN	
		FI	ight LY001			
7. NAME(S) OF ACCOMPANYING HOUSEHOLD MEMBERS (wife, husba	and, minor childr	en, etc.)				
Moran Shochat Snir (wife), Tomer Snir (child), L	Jri Snir (chi	ld), Itai Snir (child)			
8.THE ARTICLES FOR WHICH A. DATE	B. NAME OF VE	SSEL/CARRIER	C. FROM (Country)		D. B/L OR AWB C	OR I.T. NO.
FREE ENTRY IS CLAIMED BELONG TO ME AND/OR MY						
FAMILY AND WERE IMPORTED						
E. NUMBER AND KINDS OF CONTAINERS	F. MARKS AND I	NUMBERS			1	
PART II TO BE COMPLETED BY ALL PERSONS EXCEPT U	.S. PERSONN	EL AND EVACUEES				
9. RESIDENCY ('X" appropriate box)	_	A. NAME OF COUNTR	RY	B. LENGTH C	OF TIME	
I declare that my place of residence abroad is wa	as 🔻	Israel			5 Yr.	Mo.
C. RESIDENCY STATUS UPON MY/OUR ARRIVAL ("X" One)						
(1) Returning resident of the U.S.	2) Nonresident:	a. Emigrating to the	he U.S.	b. Visitin	g the U.S.	
10. STATEMENT(S) OF ELIGIBILITY FOR FREE ENTRY OF ARTICLES						
I the undersigned further declare that ("X" all applicable items and submit	packing list):					
· · · · · · · · · · · · · · · · · · ·						
A. Applicable to RESIDENT AND NONRESIDENT		C. Applicable to N	ONRESIDENT ON	LY		
(1) All household effects acquired abroad for which free entry is soug	aht were used	(1) All articles of a	pparel, personal ador	nment, toiletries	and similar perso	nal effects
abroad for at least one year by me or my family in a household of	f which I or my	for which free	entry is sought were a	actually owned by	me and in the po	ossession of
family was a resident member during such period of use, and are for any other person or for sale. (9804.00.05, HTSUSA)	not intended		se members of my fan ne United States and t			
(2) All instruments, Implements, or tools of trade, occupation or empl	lovment and all		se and not for any oth			
professional books for which free entry is sought were taken abro	ad by me or for	(0) A				
my account or I am an emigrant who owned and used them abroa 9804.00.15, HTSUSA)	ad. (9804.00.10,		railers, bicycles or oth ort of me and my famil			
B. Applicable to RESIDENT ONLY			e to my personal use			
All personal effects for which free entry is sought were taken abroad by account. (9804.00.45, HTSUSA)	by me or for my					
, , ,						
PART III TO BE COMPLETED BY U.S. PERSONNEL AND E						
I, the undersigned, the owner, importer, or agent of the importer of the perspossession of the importer, or of a member of the importer's family residing	sonal and housel	hold effects for which free	entry is claimed, here	eby certify that the	ey were in direct	personal
termination of assignment to extended duty (as defined in section 148.74(c	d) of the Customs	s Regulations) at a post o	r státion outside the U	Inited States and	the CBP Territor	y of the
United States, or because of Government orders or instructions evacuating person and that they do not include any alcoholic beverages or cigars. Fre						
United States.	se entry for these	enects is claimed under t	Subfleading No. 9005	.00.50, Haililoniz	ed Tariii Ochedu	ie oi tile
1. DATE OF IMPORTER'S LAST DEPARTURE FROM THE U.S.		2. A COPY OF THE IMP	ORTER'S TRAVEL O	RDERS IS ATTA	CHED AND THE	ORDERS
		WERE ISSUED ON:				
PART IV TO BE COMPLETED BY ALL PERSONS SEEKING	G FREE ENTR	Y OF ARTICLES (Certa	ain articles may be su	bject to duty and	or other	
requirements and must be specifically declar						
A. For U.S. Personnel, Evacuees, Residents and Non-Residen	nts E	B. For Residents and	Non-Residents Ol	NLY		
(1) Articles for the account (2) Articles for sale or	_	(7) Foreign household	effects acquired X	(8) Foreign bo	ousehold effects	acquired
of other persons. (2) Articles for sale of commercial use.	L	abroad and used le			nd used more tha	
(3) Firearms and/or (4) Alcoholic articles of all		. For Resident ONLY	•			
ammunition. types or tobacco produ	IX	(9) Personal effects ac	equired abroad.			
(5) Fruits, plants, seeds, (6) Fish, wildlife, animal	<u></u>					
meats, or birds. products thereof.		(10) Foreign made arti acquired abroad of	icles acquired in the U on another trip that wa			this trip or
	_	(11) Articles taken abr	·			oad.
	L	I VIII I I I I I I I I I I I I I I I I	minon antoralit	o. ropano Wei	- 20011100 0010	

D. LIST OF ARTICLES					
(1) ITEM NUMBER CHECKED IN PART IV, A., B., C.	(2) DESC	RIPTION OF MERCHANDISE	(3) VALUE OR COST OF REPAIRS	THIS TRI	N MERCHANDISE TAKEN ABROAD P: State where in the U.S. the foreign dise was acquired or when and where it ously declared to CBP.
PART V CARRIER'S CEF	OTICICATE AND	DELEASE ORDER			
The undersigned carrier, to who	m of upon whose or	der the articles described in PART I, 8.,	must be released, herel	by certifies that the pe	erson named in Part I, 1., is the owner or
consignee of such articles within	•		van ta ralagae the article	no to quob consignos	
NAME OF CARRIER	is of section 464(ff),	Tariff Act of 1930, authority is hereby gi	2. SIGNATURE OF A		
				, ,	,
DARTIN OFFICIATION	1 TO DE COMPI	ETED DV ALL DEDOONO OFFICE	IO EDEE ENTRY		
I, the undersigned, certify that the		ETED BY ALL PERSONS SEEKINg rect and complete.	NG FREE ENTRY		
1. "X" One A. Authorized Agent* (Fro	om facts obtained fro	om the importer)	B. Importer		
2. SIGNATURE		om the imperior,	B. importor	3. DATE	
*An Authorized Agent is defined as a	person who has actua		empowered under a power	of attorney to execute the	nis declaration (see 19 CFR 141.19, 141.32, 141.33).
PART VII CBP U		1. SIGNATURE OF CBP OFFICIAL			2. DATE
(Inspected and Rel	leased)				

TREASURY DEPARTMENT U.S. CUSTOMS SERVICE SUPPLEMENTAL DECLARATION FOR UNACCOMPANIED PERSONAL AND HOUSEHOLD EFFECTS

Owner of Househole (Last, first and midd)	0 . 0		
2. Date of Birth	12/20/1979	3. Citizenship USA	
4. Passport (Country a	and Number) USA, A0459996	62	
5. Social Security No.		6. Resident Alien No.	
7. U.S. Address		10. Employer Nest Health Tech LTD	
251 Central Park V	West #2A, New York, NY 10024		
		11. Position with Company COO	
8. Foreign Address	251 Central Park West #2A		
	New York, NY 10024	12. Length of Employment 3.5 years	S
		13. Nature of Business Digital Healt	th Software
9. Reason for Moving Short term business		14. Name and Telephone of Company Of Above Information	fficial Who Can Verify
	·	Moran Shochat Snir, 415-313-4643	
15. Name and Addres Packers and Shipp	ss of Freight Forwarders ping Agents		
A. UNIVERS TF	RANSIT Itd.		
3 Hasharon st, A	Airport City, Israel		
16. Shipment Itinerary (specify place of lo	/ pading and intermediate ports)		
17. Certification I, the undersigned, cer	rtify that this declaration is correct and	complete	
☐ A. Authorized Age	nt (from facts obtained from the importe	er)	
☑ B. Importer			
Signature		Date	06/18/2025