# **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	N BY THESE PE	RESENTS: That,	(X) Maia Ray	monde Elgressy		
		,	(Full nam	e of Shipper)		
Residing at (X)	5 Charen cour	rt, Potomac, Mar	yland 20854			
hereby constitutes	and appoints the	e following Custon	ns House Brok	er:		
date and in all Cus declaration, certific transportation, or e	toms Districts, a cate, bill of ladir exportation of an	nd in no other nam ng, carnet or other y merchandise shi	ne, to make, en document requ pped or consig	ndorse, sign, declare nired by law or regul gned by or to said gr	, or swear to any enti- lation in connection antor; to perform any	with the importation,
declare, or swear to manufacture, certifientry, declaration of	o any statement, ficate of manufactor of exporter on drosses, regardless	supplemental state cture and delivery rawback entry, or a of whether such b	ement, schedul abstract of ma any other affidal Il of lading, sv	le, supplemental sch anufacturing records avit or document wh worn statement, sche	edule, certificate of one of the control of the control of properties of the control of the cont	ck, and to make, sign, delivery, certificate of orietor on drawback by law or regulation stract, declaration, or
withdrawal of impentry, clearance, la and any and all bor	orted merchandi ding, unlading o nds which may b	se or merchandise or navigation of an oe voluntarily give	exported with y vessel or oth and accepted	or without benefit of er means of conveya d under applicable L	regulation in connection of drawback, or in contains ance owned or operations, and regulations, and regulations, and regulations.	ted by said grantor, consignee's and
						ulation in connection d or operated by said
of protests under so properly be transac anything whatever ratifying and confi- attorney to remain is duly given to and	ection 514 of the sted or performe requisite and ne rming all that the in full force and d received by a l	e Tariff Act of 193 d by an agent and decessary to be done e said agent and at deffect until the	0, in which sat attorney, giving in the premise torney shall la day of f Customs. If the	id grantor is or may  g to said agent and a  es as fully as said gra  wfully do by virtue  , 2  he donor of this pow	be concerned or inte attorney full power a antor could do if pre of these presents: the	sent and acting, hereby e foregoing power of revocation in writing
IN WITNESS WH	EREOF, the said	u (2 <b>x</b> )	monde Elgress	sy		
		(Full name	of shipper)	. 🜾		11/06/0227
has caused these pr	resents to be sign		M	309	DATE <b>(X)</b>	11/06/2025
	a =:	. •	re of Shipper)		ľ	ころとう フルト
WITNESSED BY				(X)		_
	(Witness na	ame)			Witness 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 B							
1. IMPORTER'S NAME (Last, first and	<u> </u>	nts are subject to verification				'S DATE OF ARRIV	/AI
Maia Raymonde Elgressy		2. IMPORTER'S DATE OF BIRTH		3 DATE OF ARRIV	AL		
4. IMPORTER'S U.S. ADDRESS	12/23/1990   11/19/2025   5. IMPORTER'S PORT OF ARRIVAL						
T. IVII GIVIEIVO G.G. ABBIVEGO			3. IIVII GICIERGI GI	TO ATTITUTE			
5 Charen court, Potomac, Maryland	20854		6. NAME OF ARRIVI	NG VESSEL CAR	RIER AND FLIGHT/T	RAIN	
7. NAME(S) OF ACCOMPANYING HO	USEHOLD MEMBERS (	(wife, husband, minor chil	dren, etc.)				
				_			
8.THE ARTICLES FOR WHICH FREE ENTRY IS CLAIMED BELONG TO ME AND/OR MY	A. DATE	B. NAME OF V	ESSEL/CARRIER	C. FROM (Cou	intry)	D. B/L OR AWB OF	I.T. NO.
FAMILY AND WERE IMPORTED  E. NUMBER AND KINDS OF CONTAIN	VERS	F. MARKS AND	NUMBERS				
E. NOMBER AND KINDS OF CONTAIN	VERS	F. WARRS AND	NONBERS				
DARTIL TO BE COMPLETED B	V ALL DEDCONE E	VCEDTILE DEDEON	NEL AND EVACUEE	•			
PART II TO BE COMPLETED B 9. RESIDENCY ('X" appropriate box)	T ALL PERSONS EX	ACEPT U.S. PERSON	A. NAME OF COUN		B. LENGTH	OF TIME	
I declare that my place of residence	abroad  is	was	> / . IV WILL OF GOOR		D. EENOTT	Yr.	Mo.
C. RESIDENCY STATUS UPON MY/O							
(1) Returning resident of the U.S.	,	(2) Nonresident:	a. Emigrating to	the U.S.	b. Visitii	ng the U.S.	
10. STATEMENT(S) OF ELIGIBILITY F	OR FREE ENTRY OF A	ARTICLES					
I the undersigned further declare that ("	X" all applicable items a	and submit packing list):					
A Applicable to DESIDENT AND	NONDESIDENT		C. Applicable to	NONDESIDENT	ONLY		
A. Applicable to RESIDENT AND	NONKESIDENI		C. Applicable to				
<ul> <li>(1) All household effects acquired abroad for at least one year by</li> </ul>					adornment, toiletries ere actually owned b		
family was a resident member	during such period of us	se, and are not intended	myself, or th	ose members of m	y family who accomp	anied me, at the tim	ne of
for any other person or for sale	•	•	our personal		and that they are app ny other person nor fo		
<ul><li>(2) All instruments, Implements, o professional books for which fr</li></ul>			r —				
my account or I am an emigrar 9804.00.15, HTSUSA)	nt who owned and used	them abroad. (9804.00.10			or other means of cor family and such incid		
B. Applicable to RESIDENT ONL	_Y		are appropri	ate to my personal	use of the conveyand	ce. (9804.00.35, HT	SUSA)
All personal effects for which free		en abroad by me or for my	,				
account. (9804.00.45, HTSUSA)	may to bought word take	on abroad by the or lor my					
BART III TO BE COMPLETED	DVIIS DEDSONNE	I AND EVACUEES O	MI V				
PART III TO BE COMPLETED III, the undersigned, the owner, importer,				ee entry is claimed	hereby certify that th	nev were in direct pe	ersonal
possession of the importer, or of a mem termination of assignment to extended of	ber of the importer's fan	nily residing with the impo	rter, while abroad, and th	at they were impor	ted into the United St	ates because of the	•
United States, or because of Governme	ent orders or instructions	evacuating the importer t	o the United States; and	that they are not im	ported for sale or for	the account of any	other
person and that they do not include any United States.	alcoholic beverages or	cigars. Free entry for thes	se effects is claimed unde	er Subheading No. 9	9805.00.50, Harmoni	zed Tariff Schedule	of the
1. DATE OF IMPORTER'S LAST DEPA	ARTURE FROM THE U.	S.	2. A COPY OF THE IM		EL ORDERS IS ATTA	ACHED AND THE (	DRDERS
			WERE ISSUED ON:	:			
PART IV TO BE COMPLETED	BY ALL PERSONS	SEEKING EREE ENT	RY OF ARTICIES (Ce	ertain articles may h	he subject to duty and	l/or other	
		ifically declared herein. Pl					
A. For U.S. Personnel, Evacuees	. Residents and Nor	n-Residents	B. For Residents an	d Non-Resident	ts ONLY		
, =	· 🗖	-	(7) Foreign househo		_	ousehold effects ac	rauired
(1) Articles for the account of other persons.	(2) Articles for s commercial			less than one year		nd used more than	
(3) Firearms and/or	(4) Alcoholic art		C. For Resident ONL	_Y			
ammunition.	types or tob	pacco products.	(9) Personal effects	acquired abroad.			
(5) Fruits, plants, seeds, meats, or birds.	(6) Fish, wildlife, a products there	e, animal ereof	<b>1</b> (10) Earning ===================================	urtiolog goguirod in	the United States are	I takan ahraad as 4	nio trin
modo, or bilds.	products the				the United States and at was previously ded		iis trip or
		Г	(11) Articles taken a	broad for which alto	erations or repairs we	ere performed abroa	ıd.

D. LIST OF ARTICLES					
(1) ITEM NUMBER CHECKED IN PART IV, A., B., C.	(2) DESCI	RIPTION OF MERCHANDISE	(3) VALUE OR COST OF REPAIRS	THIS TRII	I MERCHANDISE TAKEN ABROAD P: State where in the U.S. the foreign lise was acquired or when and where it ously declared to CBP.
PART V CARRIER'S CER				CC 41 44	1: 5 4
consignee of such articles within			must be released, neres	by certifies that the pe	erson named in Part I, 1., is the owner or
In accordance with the provisions of section 484(h), Tariff Act of 1930, authority is hereby given to release the articles to such consignee.  1. NAME OF CARRIER  2. SIGNATURE OF AGENT (Print and sign)  Date					
			2. 6.6.0.1. 6.1.2 6.7	.o ( aa o.g	, <u>J</u> uio
PART VI CERTIFICATION	TO BE COMPL	ETED BY ALL PERSONS SEEKIN	NG FREE ENTRY		
I, the undersigned, certify that this					
1. "X" One A. Authorized Agent* (From facts obtained from the importer)  B. Importer					
2. SIGNATURE				3. DATE	
*An Authorized Agent is defined as a p	knowledge of the facts and who is specifically	empowered under a power	of attorney to execute the	nis declaration (see 19 CFR 141.19, 141.32, 141.33).	
PART VII CBP USE ONLY (Inspected and Released)  1. SIGNATURE OF CBP OFFICIAL					2. DATE

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

(Last, 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
	13. Nature of Business
9. Reason for Moving	
	14. Name and Telephone of Company Official Who Can Verify Above Information
15. Name and Address of Freight Forwarders Packers and Shipping Agents	
16. Shipment Itinerary (specify place of loading and intermediate ports)	
17. Certification I, the undersigned, certify that this declaration is correct a	and complete
$\square$ A. Authorized Agent (from facts obtained from the imp	porter)
☐ B. Importer	
Signature	Date