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- 6. أأسر العاللة / Surname / Nom / Paminin / Apellidos
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- 14. الله الإصابة 14 مناه 14 Date of Issue/Date de délivrance/Hara asmain/Fecha de expedición
- 15. 3 / Land 发证 图 发(Authority Autorite / Hoanoxovinast autoranum) Autoridad
- المرحة التياء الصلاحية / Date of expiry / Date d'expiration / Hara nereseium acaermus / Fecha de venchmiento

持证人签名/Holder's signature/Signature du titulaire/ Подпись предъявителя/Firma del portador.

1. UNITED NATIONS - NATIONS UNIES



3. Type/ 2. LAISSEZ-PASSE

4. Code of issuing Organization/ Code de l'Organisation émettrice

UNO

5. Laissez-Passer No./ No de Laissez-Passer

SUNB95539D

6. Sumame / Nom

CASTILHOS FRANCA NETO

7. Given names / Prénoms

HELIO

8. Official of / Fonctionnaire de

9. Date of birth / Date de naissance

26 NOV /NOV 1982

20099310

10. Index No. /No de code

11, Sex / Sexe

12. Title / Titre

OFFICIAL OF UNITED NATIONS

14. Date of issue / Date de délivrance

10 JUN /JUIN 2020

16. Date of expiry / Date d'expiration

10 JUN /JUIN 2025

15. Authority / Autorité

UNITED NATIONS - NATIONS UNIES

PLUNOCASTILHOS<FRANCA<NETO<<HELIO<<<<<<< SUNB955391UN08211262M2506104<<<<<<<<<<< HACIONALIDADE / NATIONALITY BRASILEIRO

PASSAPORTE PASSPORT

1/1

CONTRACTOR OF THE

900

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900

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Assinatura de Titular / Signature du titulaire Bearer's signature / Firma del titular

9 9 9

tste passaporte deve ser assinado pelo titular, salvo em caso de incapacidade

Ce passeport doit être signé par le titulaire,

. .

sauf ein cas d'incapadité.

except where the bears is unable to do so. This passport must be signed,

Iste pseporte delce ser fimedo por el titular,

REPÚBLICA FEDERATIVA DO BRASIL

TIPO / TYPE PAÍS EMISSOR / REGUING COUNTRY
P BRA CASTILHOS FRANÇA NETO

PASSAPORTE Nº / PASSPORT No. YE556061

HELIO HOME / GIVEN NAMES

IDENTIDADE Nº / PERSONAL No.

DATA DE NASCUMENTO / DATE DE BIRTH 26 NOV/NOV 1982

AUTORIDADE / AUTHORITY
GENEBRA CG

M RIO DE JANEIRO, RJ, BRASIL DATA DE ESPEDIÇÃO / DATE OF ISSUE 04 ABR/APR 2023

VALDO ATÉ /DATE OF EXPRY 03 ABR/APR 2033

P<BRACASTIL HOS<FRANCA<NETO<<HEL 10<<<<<<< YE556061<3BRA8211262M3304031<<<<<<<<<<

> WASSEN. JERUSALEM Passport Number YE556061 Entries HEL_IO NEW YORK, NY Given Name CASTILHOS FRANCA NETO Surname UNITED NATIONS Annotation 31AUGZ023 Birth Date 26NOV1982 21AUG2026 20232349710001 0 Visa Type /Class U2067556 BRZL 9 1000

VNUSACASTILHOS<FRANCA<NETO<<HELIO<<<<<<<

YE556061<3BRA8211262M2608215G4JRS0A3YL942197

To : Customs Authorities B G Airport / Ashdod / Haifa Po	Date:			
Dear Macam / Sir				
Re: Declaration for Pers	onal Effects Shipping of Overseas.			
Personal reasons. Other reasons	Employment reasons. Studies reasons. Studies reasons. General effects to: Family. Others.			
Detail: N/A				
during the last six years. 4. Hereby I declare that I manights during the last six y	eclare that I Did / Did not use returning citizen rights N/A ade Aliya to Israel on and Did / Did not use Oleh Hadash ears. N/A Hélio Castilhos França Neto			
5. Reciever's full name : Reciever's full adress	1 United Nations Plaza 10017 New York City - NY			
Tel. no. Incl. local code :	+41 762065935			
Fax no. incl. local code .				
Hereby I declare that all above details are true and correct, and goods are send for personal use only				
Hélio Castilhos França Net	1.D. No. YE556061 O5/09/23 Date Signature	\rightarrow		
Full address in Israel - H	anevi'im 41, Apartment 6, Jerusalem Israel			

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

 Owner of Household (Last, first and middle) 	CACTILLOCEDANICA	NETO, Hélio				
2. Date of Birth 26 November 1982		_ 3. Citizenship Brazilian				
4. Passport (Country a	nd Number) YE556061					
5. Social Security No.		6. Resident Alien No.				
7. U.S. Address 1 United Nations Plaza		10. Employer UNDP				
100	017 New York City - NY					
		11. Position with Company Legal Specialist				
8. Foreign Address	Rua Lavras, 56/101					
·	Belo Horizonte - MG	12. Length of Employment				
	Brazil	13. Nature of Business United Nations				
9. Reason for Moving	Employment at UNDP					
5		14. Name and Telephone of Company Official Who Can Verify Above Information				
		Florencia Celasco +1 646 479 2285				
15. Name and Addres Packers and Ship	ss of Freight Forwarders	A. Univers Transit Ltd.				
rackers and only	ping Agonto	5, Sharon St. AirPort City, Israel				
		P.O.Box 1016, Airport City 7010000				
1						
16. Shipment Itinerar (specify place of I	y oading and intermediate ports)					
17. Certification I, the undersigned, ce	ertify that this declaration is correct and c	complete				
☐ A. Authorized Age	ent (from facts obtained from the importe	ar)				
☐ B. Importer	1/1/1					
Signature	Alleys	Date Date				

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).

Hélio Castilhos França Neto KNOW ALL MEN BY THESE PRESENTS: That, (X) Residing at (X) 1 United Nations Plaza, 10017 New York City - NY (U.S. Address) hereby constitutes and appoints the following Customs House Broker: as a true and lawful agent and attorney of the grantor named above for and in the name, place, And stead of said grantor from thus date and in all Customs Districts, and in no other name, to make, endorse, sign, declare, or swear to any entry, withdrawal, declaration, certificate, bill of lading, carnet or other document required by law or regulation in connection with the importation, transportation, or exportation of any merchandise shipped or consigned by or to said grantor, to perform any act or condition which may be required by law or regulation in connection with such merchandise; to receive any merchandise deliverable to said granioi. To make endorsements on bills of lading conferring authority to transfer title, make entry or collect drawback, and to make, sign. declare, or swear to any statement, supplemental statement, schedule, supplemental schedule, certificate of delivery, certificate of manufacture, certificate of manufacture and delivery, abstract of manufacturing records, declaration of proprietor on drawback entry, declaration of exporter on drawback entry, or any other affidavit or document which may be required by law or regulation for drawback purposes, regardless of whether such bill of lading, swom statement, schedule, certificate, abstract, declaration, or other affidavit or document is intended for filing in any customs district; To sign, seal, and deliver for and as the act of said grantor any bond required by law or regulation in connection with the entry or withdrawal of imported merchandise or merchandise exported with or without benefit of drawback, or in connection with the entry, elearance, lading, unlading or navigation of any vessel or other means of conveyance owned or operated by said grantor. and any and all bonds which may be voluntarily given and accepted under applicable Laws and regulations, consignee's and owner's declarations provided for in section 485, Tariff Act of 1930, as amended or affidavits in connection with the entry of merchandise. To sign and swear to any document and to perform any act that may be necessary or required by law or regulation in connection with the entering, clearing, lading, unlading, or operation of any vessel or other means of conveyance owned or operated by said And generally to transact at the customshouses in any district, any and all customs business, including making, signing, and filing of protests under section 514 of the Tariff Act of 1930, in which said grantor is or may be concerned or interested and which may properly be transacted or performed by an agent and attorney, giving to said agent and attorney full power and authority to do anything whatever requisite and necessary to be done in the premises as fully as said grantor could do if present and acting, hereby ratifying and confirming all that the said agent and attorney shall lawfully do by virtue of these presents: the foregoing power of , or until notice of revocation in writing atterney to remain in full force and effect until the _____ day of ____ is duly given to and received by a District Director of Customs. If the donor of this power of attorney is a partnership, the said power shall in no case have any force or effect after the expiration of 2 years from the date of its execution, IN WITNESS WHEREOF, the said (X) Hélio Castilhos França Neto DATE (X) 5 September 2023 has eaused these presents to be signed (X) WITNESSED BY (X) Jan-Christopher Castilhos França (X)

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), or a <u>numbered inventory</u> which the packers will complete if yours is a professionally-packed household removal.

Excest International Movers



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

OMB APPROVAL NO 1651-0012 EXPIRES 11 30-0002 ESTINATED BURDETI 45 M/V

DECLARATION FOR FREE ENTRY OF UNACCOMPANIED ARTICLES

19 CFR 148.6, 148 52, 148.53, 148.77

Paperwork Reduction Act Statement An current valid OMB control number and an								
The opligation to respond to this informal	tion correction is mandatory to obtain bene	erds. If you have any comments r	legarding the purper	estimate y	ou can write to	a CBF PRA Chicer		
D.S. Customs and border miotection, Oth	ALL PERSONS SEEKING FREE EN	euk atreet NE., Washington DU z	UZZGELIZZ					
assistance. REMEMBER-All of you	ur statements are subject to verification	on. False declarations or failu	re to declare artic					
1, IMPORTER'S NAME (Last, first a	and midale initial)	2. IMPORTER'S D.	ATE OF BIRTH	3 IMPC	KIEKS DW	I E OF FRANCE		
Hélio Castilhos Franc	ca Neto	26 Novem	ber 1982	163	Septemb	per 2023		
4. IMPORTER'S U.S. ADDRESS		5 IMPORTER'S P		L.)				
1 United Nations Plaz	а	New York	VING VESSEL C	ARRIER A	ND FLIGHT/	TRAIN		
10017 New York City	- NY	UA85 (Unit	8. NAME OF ARRIVING VESSEL CARRIER AND FLIGHT/TRAIN UA85 (United Airlines)					
7. NAME(S) OF ACCOMPANYING	HOUSEHOLD MEMBERS (wife, hus							
Jan-Christopher Cas	tilhos Franca							
B THE ARTICLES FOR WHICH		ME OF VESSEL/CARRIER	C. FROM (Cou	ntry)	D. BIL OR	ON TIPO BWA		
PREE ENTRY IS CLAIMED SELONG TO ME AND/OR MY FAMILY AND WERE IMPORTED			Israel					
E NUMBER AND KINDS OF CON		ARKS AND NUMBERS						
received to the control of the contr								
	Y ALL PERSONS EXCEPT U.S. PER	PRONNEL AND EVACUEES						
9 RESIDENCY ("X" appropriate by		A. NAME OF COUNTRY	,		TH OF TIME	* *		
declare that my place of resider		Israel		3	Yr. 1	Mo.		
D. RESIDENCY STATUS UPON A	MY/OUR ARRIVAL ("X" One)		So Appropriate (Control & Control					
	ALCO IOS Management Y 5 F	migrating to the U.S.	b. Visiting the U.S	S.	and submit no	rekon list)		
10 STATEMENT(S) OF ELIGIBILITY A. Applicable to RESIDENT and	Y FOR FREE ENTRY OF ARTICLES 1	the undersigned further declare C. Applicable to	MONDESIDENT	OMI V	died paperer he	County Sary -		
period of use and are not (9804 00.05, HTSUSA) (2) All instruments, implements and all professional book	east one year by file of member during family was a resident member during tintended for any other person or for the solution of the solution	sale. such per sale. (98 nployment. (2) Any vehicaken incidenta	104,00,05, HTSUS trailers, bicyc	e not intend (A) lies or other ort of me a es as are a	t means of country means of country family income to the country family incorporate to	onveyance being		
3. Applicable to RESIDENT ON								
All personal effects for which me or far my account (9804.	free entry is sought were taken abri	oad by						
TO THE COMMITTED	BY II S PERSONNEL AND EVACUE	EES ONLY						
the undersigned, the owner, im- were in direct personal possession into the United States because o station outside the United States United States; and that they are to	porter or agent of the importer of the norther months of the importer, or of a member of the fittee termination of assignment to exand the CBP Territory of the United not imported for sale or for the accounted under Subheading No. 9805.03.	personal and household effer the importer's family residing wo cended duty (as defined in s States, or because of Gover unt of any other person and the State of Government of the School	ection 148,74(d) on nment orders or in that they do not in ale of the United S	of the Cus nstructions nclude any lates.	toms Regula evacuating t alcoholic be	tions) at a post or the importer to the everages or cigars		
			variable and the second					
requirements and must be specific	BY ALL PERSONS SEEKING FREE Cally declared herein. Please check a	it applicable itellia alia nat ma			t to duty and/ ne reverse.)	or other		
A. For U.S. Personnel, Evacuee	es, Residents and Non-Residents	B. For Residents and N	ion-Residents Of	N 1				
(1) Articles for the account of other person.	(2) Articles for sale or commercial use	(7) Foreign housen acquired abroad than one year.	old effects and used less	LA a	ore gn house oquired abroi nan one year	ad and used more		
(3) Firearms and/or ammunition.	(4) Alcoholic articles of all types or tobacco products	The second secon						
(5) Fruits, plants, seeds, meats, or birds. (6) Fish, wildlife, animal products thereof. (10) Foreign made articles acquired in the United States are this big or acquired abroad on another trip that was products thereof.					nat was previo	previously declared to CBP		
		[] (11) Articles taken a	broad for which alte	erations or	repairs were p			
				W- 100		Page 1 of		

DILIST OF ARTICLES							
CHECKED IN PART IV A. B. C.	(2) DESCRIPTION OF MERCHANDISE	(3) VALUE OF COST OF REPAIRS	(4) FOREIGN MERCHANDISE TAKEN ABROAD THIS TRIP: State where in the U.S. the foreign merchandise was acquired or when and where it was previously declared to CBP.				
State of the state							
		- Harris Aller					
DARTH OFFICE	ERTIFICATE AND RELEASE ORDER						
	and the second order the articles describ	ed in PART I, 8,, must be	e released, hereby certifies that the person named in Part I.				
 is the owner or consign 	ide of such articles within the purview or section						
	ons of section 484(h). Tariff Act of 1930, authorit	2. SIGNATURE OF A	GENT (Print and sign)				
1 NAME OF CARRIER		Print					
		Sign					
5/64 **	ON TO BE COMPLETED BY ALL PERSONS S	A Camping Commence					
the undersigned, certify	that this declaration is correct and complete.						
1 FAM / Top or		B. Importer					
			3. DATE				
3 SIGNATURE (Sign in ink)			5 September 2023				
	The state of the s	the facts and who is spe	olically empowered under a power of attorney to execute this				
Vin Authorized Agent is di declaration (see 19 CFX)	Mined as a person with eas ectual knowledge of 141 19 141 32, 141 33)		officially empowered under a power of attorney to execute this				
PART VII - CBP L	JSE ONLY 1. SIGNATURE OF OB-	OPPRIAL (SIGN IS IN)	6. MO. S.				
(inspected and R	(eleased)		Process of the Control of the Contro				