## **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 E	Y THESE PRESENTS:	That, (X)	Devorah Leah Ahke	enazi		
			(Full name of Shipper)			
Residing at (X)	11 Graniks Way Mo	ontebello, NY	/ 10901			
(U	.S. Address)					
hereby constitutes an	d appoints the following	Customs Ho	ouse Broker:			
	A. Univers Transit Ltd					
date and in all Custor declaration, certificat transportation, or exp	gent and attorney of the ns Districts, and in no ot e, bill of lading, carnet o ortation of any merchand ed by law or regulation in	her name, to r other docur dise shipped	make, endorse, sign, doment required by law or or consigned by or to s	eclare, or swear to r regulation in co- aid grantor; to pe	o any entry, nnection wi erform any a	withdrawal, th the importation, ct or condition
declare, or swear to a manufacture, certifica entry, declaration of for drawback purpose	ts on bills of lading conf ny statement, supplement ate of manufacture and dexporter on drawback en es, regardless of whether ument is intended for fili	tal statement elivery, abstratry, or any of such bill of	t, schedule, supplement ract of manufacturing re ther affidavit or docume lading, sworn statemen	al schedule, certi ecords, declaration ent which may be	ficate of del on of proprie e required by	ivery, certificate of etor on drawback y law or regulation
withdrawal of import entry, clearance, ladin and any and all bonds	iver for and as the act of ed merchandise or merch ng, unlading or navigation is which may be voluntaring provided for in section 4	nandise expo n of any ves lly given and	orted with or without be sel or other means of co I accepted under applica	nefit of drawback onveyance owned able Laws and re	k, or in conn d or operated gulations, co	ection with the d by said grantor, onsignee's and
	any document and to per aring, lading, unlading, o					
of protests under sect properly be transacted anything whatever re- ratifying and confirm attorney to remain in is duly given to and r	sact at the customshouse ion 514 of the Tariff Act d or performed by an age quisite and necessary to ing all that the said agen full force and effect unti eceived by a District Dir e have any force or effect	of 1930, in ent and attorned done in the tand attorned the ector of Custon.	which said grantor is oney, giving to said agentie premises as fully as say shall lawfully do by a day oftoms. If the donor of the	r may be concern it and attorney fu aid grantor could virtue of these pro- , 2, or until is power of attor	ld or interest ll power and l do if present esents: the foll notice of re- ney is a part	sted and which may I authority to do nt and acting, hereby pregoing power of evocation in writing
IN WITNESS WHER	REOF, the said (X)	Devorah	Leah Ahkenazi			
has caused these pres	ents to be signed (X)	ull name of ship    Deposit of Signature of	sheez	Γ	OATE <b>(X)</b>	4/14/2024
WITNESSED DV 🐠	<b>1</b>		** /	<b>(V)</b>		
WITNESSED BY (X	(Witness name)			(X) Witness Sig	gnature	

#### 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						
I. IMPORTER'S NAME (Last, first and mid	False declarations or failure to declare article     2. IMPORTER'S DATE OF BIRTH		3. IMPORTER'S DATE OF ARRIVAL			
4. IMPORTER'S U.S. ADDRESS			5. IMPORTER'S PORT OF ARRIVAL			
			6. NAME OF ARRIVIN	G VESSEL CARRIEF	R AND FLIGHT/TR	RAIN
7. NAME(S) OF ACCOMPANYING HOUS	SEHOLD MEMBERS (wife, hu	usband, minor childre	en, etc.)			
	T	T=		Ta == aa		
8.THE ARTICLES FOR WHICH FREE ENTRY IS CLAIMED	A. DATE	B. NAME OF VES	SSEL/CARRIER	C. FROM (Country)	)	D. B/L OR AWB OR I.T. NO.
BELONG TO ME AND/OR MY FAMILY AND WERE IMPORTED	03/13/2024	EI AI		Israel		
E. NUMBER AND KINDS OF CONTAINE	RS	F. MARKS AND N	NUMBERS	•		
	411 PERSONS EVOER		=: =:/			
9. RESIDENCY ('X" appropriate box)	ALL PERSONS EXCEPT	U.S. PERSONN	A. NAME OF COUNTS	2V	B. LENGTH O	F TIME
I declare that my place of residence ab	road is	was	·		D. LENGTH O	Yr. Mo
C. RESIDENCY STATUS UPON MY/OUF						
(1) Returning resident of the U.S.		(2) Nonresident:	a. Emigrating to t	he U.S.	b. Visiting	g the U.S.
10. STATEMENT(S) OF ELIGIBILITY FOI						
I the undersigned further declare that ("X"	all applicable items and subr	Till packing list):				
A. Applicable to RESIDENT AND N	IONRESIDENT		C. Applicable to N	ONRESIDENT ON	ILY	
(1) All household effects acquired ab abroad for at least one year by m family was a resident member du for any other person or for sale. (	ie or my family in a household iring such period of use, and a	d of which I or my	for which free myself, or thos departure to the	entry is sought were se members of my far ne United States and	actually owned by mily who accompa that they are appro	and similar personal effects me and in the possession nied me, at the time of opriate and are intended fo
(2) All instruments, Implements, or to professional books for which free my account or I am an emigrant v 9804.00.15, HTSUSA)	entry is sought were taken a	broad by me or for	(2) Any vehicles, for the transpose	trailers, bicycles or ot ort of me and my fami	her means of conv ly and such incide	sale. (9804.00.20 HTSUS reyance being imported ar ntal carriage of articles as e. (9804.00.35, HTSUSA)
B. Applicable to RESIDENT ONLY			аге арргорнас	e to my personal use	of the conveyance	s. (9004.00.33, 111303A)
All personal effects for which free ent account. (9804.00.45, HTSUSA)	ry is sought were taken abroa	ad by me or for my				
PART III TO BE COMPLETED BY	U.S. PERSONNEL AND	EVACUEES ON	LY			
I, the undersigned, the owner, importer, or possession of the importer, or of a membe termination of assignment to extended dut United States, or because of Government person and that they do not include any al United States.	er of the importer's family resid y (as defined in section 148.7 orders or instructions evacua coholic beverages or cigars. I	ding with the imported 74(d) of the Customs ating the importer to	er, while abroad, and that s Regulations) at a post o the United States; and th effects is claimed under	they were imported in the transition outside the transition outside the transition at they are not import Subheading No. 9805	nto the United Stat United States and the for sale or for the following of the following the followi	tes because of the the CBP Territory of the he account of any other ed Tariff Schedule of the
1. DATE OF IMPORTER'S LAST DEPAR	TURE FROM THE U.S.		2. A COPY OF THE IMP WERE ISSUED ON:	ORTER'S TRAVEL C	ORDERS IS ATTA	CHED AND THE ORDERS
PART IV TO BE COMPLETED B requirement	Y ALL PERSONS SEEKI nts and must be specifically d					
A. For U.S. Personnel, Evacuees, F	Residents and Non-Residents	dents B	8. For Residents and	Non-Residents O	NLY	
(1) Articles for the account of other persons.	(2) Articles for sale or commercial use.		(7) Foreign household abroad and used le			usehold effects acquired d used more than one yea
(3) Firearms and/or (4) Alcoholic articles of all		all C	. For Resident ONL	<b>(</b>		
ammunition.	types or tobacco		(9) Personal effects a	equired abroad.		
(5) Fruits, plants, seeds, meats, or birds.	(6) Fish, wildlife, anima products thereof.			n made articles acquired in the United States and taken abroad on this trip or ed abroad on another trip that was previously declared to CBP.		
			(11) Articles taken abr	oad for which alterati	ons or repairs were	e performed abroad.

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 TRII	MERCHANDISE TAKEN ABROAD  State where in the U.S. the foreign lise was acquired or when and where it busly declared to CBP.	
		diances (kitchen) pelongings (albums) pous				
PART V CARRIER'S CER	TIFICATE AND	RELEASE ORDER				
consignee of such articles within	the purview of sect				erson named in Part I, 1., is the owner or	
				2. SIGNATURE OF AGENT (Print and sign)  Date		
DADT VI CEDTIFICATION	I TO BE COMPI	ETED BY ALL PERSONS SEEK	ING EDEE ENTDY			
I, the undersigned, certify that thi			ING I KEE ENTKI			
1. "X" One A. Authorized Agent* (Fro	m facts obtained fro	om the importer)	X B. Importer			
2. SIGNATURE Demonsh L (whire)			3. DATE <b>4/14/20</b> 2	24		
*An Authorized Agent is defined as a person who has actual knowledge of the facts and who is specifically empowered under a power of attorney to execute this declaration (see 19 CFR 141.19, 141.32, 141.3					is 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

UNACCOMPANIED PER	SONAL AND HOUSEHOLD EFFECTS
1. Owner of Household Goods (Last, first and middle)  Ashkenazi, Devorah Le	eah
2. Date of Birth	3. Citizenship United States of America
4. Passport (Country and Number) USA 587699508	
5. Social Security No. <b>609-66-2436</b>	6. Resident Alien No.
7. U.S. Address  11 Graniks Way Montebello, 10901	10. Employer
	11. Position with Company
8. Foreign Address  9 Abraham Lincohn St  Jerusalem, Israel	
	12. Length of Employment
	13. Nature of Business
9. Reason for Moving relocation	
	14. Name and Telephone of Company Official Who Can Verify Above Information
15. Name and Address of Freight Forwarders Packers and Shipping Agents	
A. Univers Transit Ltd.	
16. Shipment Itinerary (specify place of loading and intermediate ports)	
17. Certification I, the undersigned, certify that this declaration is correct a	and complete
☐ A. Authorized Agent (from facts obtained from the imp	porter)
■ B. Importer	

4/14/2024

Date

Denoral L When

Signature