

SHIPPER/EXPORTER (COMPLETE NAME AND ADDRESS) A. UNIVERS TRANSIT LTD. CARGO PACKING & LOGISTICS 5, SHARON ST. AIRPORT CITY, 7015101 TEL: 08-8563145		BOOKING NO. 2304620070	BILL OF LADING NO. OOLU2304620070
CONSIGNEE (COMPLETE NAME AND ADDRESS) OMEGA RELOCATION (FL), INC. 6332 NW 97TH AVE DORAL, FL. 33178 TEL: 305-888-0337 FAX: 305-887-5121		EXPORT REFERENCES	
NOTIFY PARTY (COMPLETE NAME AND ADDRESS) (It is agreed that no responsibility shall be attached to the Carrier or its Agents for failure to notify (see Clause 13 on reverse)) OMEGA RELOCATION (FL), INC. 6332 NW 97TH AVE DORAL, FL. 33178 TEL: 305-888-0337 FAX: 305-887-5121		FORWARDING AGENT-REFERENCES FMC NO.: A. UNIVERSE TRANSIT HAHADARIM STREET 2 INDUSTRIAL ZONE ASHDOD ISRAEL	
PRE-CARRIAGE BY		POINT AND COUNTRY OF ORIGIN OF GOODS	

PLACE OF RECEIPT ASHDOD	LOADING PIER/TERMINAL HAIFA
VESSEL/VOYAGE/FLAG LIBERIA CONTSHIP RUN 445W	ORIGINALS TO BE RELEASED AT
PORT OF DISCHARGE MIAMI, FL	TYPE OF MOVEMENT (IF MIXED, USE DESCRIPTION OF PACKAGES AND GOODS FIELD) FCL / FCL CY/CY

(CHECK "HM" COLUMN IF HAZARDOUS MATERIAL)		PARTICULARS DECLARED BY SHIPPER BUT NOT ACKNOWLEDGED BY THE CARRIER		
CNTR. NOS. W/SEAL NOS. MARK & NUMBERS	QUANTITY (FOR CUSTOMS DECLARATION ONLY)	H M	DESCRIPTION OF GOODS	MEASUREMENT
OOCU7429317 /3233	148 PACKAGES		357 PACKAGES /FCL/FCL /40HQ/ SLAC:148 PKGS USED PERSONAL EFFECTS FILE 307846	2911.000KGS 22.280CBM
	209 PACKAGES		SLAC:209 PKGS USED PERSONAL EFFECTS FILE 307848	4444.270KGS 50.150CBM
TOTAL NO. OF CONTAINERS/PACKAGES RECEIVED & ACKNOWLEDGED BY CARRIER FOR THE PURPOSE OF CALCULATION OF PACKAGE LIMITATION (IF APPLICABLE): 1 CONTAINER(S)/PACKAGE(S)				
DESTINATION CHARGES COLLECT PER LINE TARIFF, AND TO BE COLLECTED FROM THE PARTY WHO LAWFULLY DEMANDS DELIVERY OF THE CARGO.				
SHIPPER LOAD AND COUNT, CONTAINER(S) SEALED BY SHIPPER				

NOTICE 1: For carriage to or from the United States of America (I) Clauses 4 and 23 on the reverse side hereof limit the Carrier's liability to a maximum of U.S \$500 per package or customary freight unit by virtue of incorporation of the U.S. Carriage of Goods by Sea Act ("COGSA"), unless the Merchant declares a higher cargo value below and pays the Carrier's ad valorem freight charge; and (II) if carried on deck at Merchant's risk as to perils inherent in such carriage but in all other respects subject to the provisions of COGSA.

NOTICE 2: See Clause 28 on the reverse side hereof. Notice to Endorsee and/or Holder and/or Transferee.

NOTICE 3: If Goods carried on deck at Merchant's risk without responsibility for loss or damage howsoever caused.

Declared Cargo Value US\$ \_\_\_\_\_ .If Merchant enters a value, Carrier's limitation of liability shall not apply and the ad valorem rate will be charged.

FREIGHT & CHARGES PAYABLE AT/BY:		SERVICE CONTRACT NO.	DOC FORM NO.	COMMODITY CODE	Received the Container/Package or other units indicated in the box identified as "Total No. of Containers/Packages received and acknowledged by Carrier" in apparent good order and condition, unless otherwise indicated, to be transported and delivered as herein provided.  The receipt, custody, carriage and delivery of the goods are subject to the terms appearing on the face and back hereof and to the Carrier's applicable tariff.  In witness whereof 0 original bills of lading have been signed, one of which being accomplished, the other(s) to be void. DATE CARGO RECEIVED _____  DATE LADEN ON BOARD o _____  DATED _____
CODE	TARIFF ITEM	FREIGHTED AS	RATE	PREPAID	
					SIGNED ISRAEL SCANDINAVIAN MARITIME BY: AGENCY LTD  _____, as agent for  ORIENT OVERSEAS CONTAINER LINE, AS CARRIER♦

The printed terms and conditions appearing on the face and reverse side of this Bill of Lading are available at www.oocl.com, in OOCL's published US tariffs, and in pamphlet form.

+ STRIKE OUT FOR ON BOARD VESSEL BILL OF LADING  
 + SEE CLAUSE 1 ON REVERSE SIDE  
 o SEE CLAUSE 2 ON REVERSE SIDE  
 QF001  
 HQD 01/01

**Ruth Laredo || A. Univers Transit Ltd.**

**From:** MCCI\_FWK\_CH.ooclprd@oocl.com  
**Sent:** 10:17 2024 נובמבר 06 יום רביעי'  
**To:** OOCL-Export-CSV  
**Subject:** Association Notice: BL2304620070

OOCL ASSOCIATION NOTICE

OOCL BL NO. : OOLU2304620070  
 SHIPPER : A.UNIVERSE TRANSIT  
 FORWARDER : A.UNIVERSE TRANSIT  
 CONSIGNEE : OMEGA RELOCATION INC.  
 NOTIFY PARTY : OMEGA RELOCATION INC.  
 SI VOYAGE : CONTSHIP RUN 445WEST  
 POR/FND : ASHDOD MIAMI, FL  
 POL/POD : ASHDOD MIAMI, FL

**MANIFESTING COUNTRY/AREA : GREECE**  
 CUSTOMS LOC. : 5201 MIAMI, FL - 4 SOUTHEAST REGION  
 DECLARATION TYPE : DIRECT DISCHARGE  
 CARGO ID :

CUST. BL/FCR REF.	OOCL INT. BL REF.	CONTAINER NO.	QTY.
-----	-----	-----	----

**MANIFESTING COUNTRY/AREA : UNITED STATES**  
 CUSTOMS LOC. : 5201 MIAMI, FL - 4 SOUTHEAST REGION  
 DECLARATION TYPE : DIRECT DISCHARGE  
 CUSTOMS SUBMISSION VOYAGE : NHAVA SHEVA EXPRESS 106WEST  
 MANIFEST VOYAGE : NHAVA SHEVA EXPRESS 106EAST  
 IT NO. :  
 PORT OF LOADING/ETA : VALENCIA 29 NOV 24 (LOCAL TIME)

CUST. BL/FCR REF.	OOCL INT. BL REF.	CONTAINER NO.	QTY.
-----	-----	-----	----
307846 - <i>TEPPER</i>	OOLU230462007001	OOCU7429317	148
307848 - <i>OHAYON</i>	OOLU230462007002	OOCU7429317	209





## PACKING INVENTORY

Shipper Name: OHAYON SHOVAL  
 Packing Job Date: 30 Oct 2024  
 Origin Address: Israel  
 Destination Address: United States



### Packed Items

Package#	Item	Comment	Wrapping	Room
1	Parts		Wrapped	-----
2	TV	700d	Wrapped	-----
3	Table		Wrapped	-----
4	Table		Wrapped	-----
5	Xbox/DVD Player	2624	Wrapped	-----
6	Bed single		Wrapped	-----
7	Bathroom items		Medium Box	-----
8	Bathroom items		Medium Box	-----
9	Decorations		Wrapped	-----
10	Clothes		Medium Box	-----
11	TV	260w	Wrapped	-----
12	Chair		Wrapped	-----
13	Toys		Large Box	-----
14	Kitchenware		Book/Small Box	-----
15	Kitchenware		Book/Small Box	-----
16	Kitchenware		Book/Small Box	-----
17	Sofa/ Couch, 2 Cushion		Wrapped	-----
18	Sofa/ Couch, 2 Cushion		Wrapped	-----
19	Table		Wrapped	-----
20	Chair		Wrapped	-----
21	Chair		Wrapped	-----
22	Chair		Wrapped	-----
23	Chair		Wrapped	-----
24	Chair, Arm		Wrapped	-----
25	Chair, Arm		Wrapped	-----
26	Chair, Arm		Wrapped	-----
27	Chair, Arm		Wrapped	-----
28	Chair, Arm		Wrapped	-----
29	Chair, Arm		Wrapped	-----
30	Picture		Flat Box	-----
31	Stand		Wrapped	-----
32	Table		Wrapped	-----
33	Kitchenware		Book/Small Box	-----

Shipper Signature on packing

Shipper: OHAYON SHOVAL

30 Oct 2024

Foreman Signature on packing

Foreman: Ilya Musienko

A. Univers Transit Ltd.

Shipper Signature on delivery

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Delivery Driver Signature

Name: \_\_\_\_\_

Company: \_\_\_\_\_



**A. UNIVERS  
TRANSIT** Ltd.  
Cargo Packing & Logistics

34	Toys		Large Box	-----
35	Kitchenware		Book/Small Box	-----
36	Toys		Large Box	-----
37	Pillows		Large Box	-----
38	Table		Wrapped	-----
39	Table		Wrapped	-----
40	Toys		Large Box	-----
41	Bed Kids		Wrapped	-----
42	Blankets		Wrapped	-----
43	Pillows		Large Box	-----
44	Basket		Wrapped	-----
45	Bathroom items		Medium Box	-----
46	Bathroom items		Medium Box	-----
47	Kitchenware		Book/Small Box	-----
48	Toys		Large Box	-----
49	Toys		Large Box	-----
50	Decorations		Wrapped	-----
51	Chair, office		Wrapped	-----
52	Mirror		Wrapped	-----
53	Kitchenware		Book/Small Box	-----
54	Kitchenware		Book/Small Box	-----
55	Kitchenware		Book/Small Box	-----
56	Kitchenware		Book/Small Box	-----
57	Kitchenware		Book/Small Box	-----
58	Kitchenware		Book/Small Box	-----
59	Kitchenware		Book/Small Box	-----
60	Kitchenware		Book/Small Box	-----
61	Kitchenware		Book/Small Box	-----
62	Kitchenware		Book/Small Box	-----
63	Kitchenware		Book/Small Box	-----
64	Kitchenware		Book/Small Box	-----
65	Kitchenware		Book/Small Box	-----
66	Kitchenware		Book/Small Box	-----
67	Kitchenware		Book/Small Box	-----
68	Kitchenware		Book/Small Box	-----
69	Kitchenware		Book/Small Box	-----
70	Kitchenware		Book/Small Box	-----
71	Kitchenware		Book/Small Box	-----
72	Kitchenware		Book/Small Box	-----
73	Kitchenware		Book/Small Box	-----
74	Kitchenware		Book/Small Box	-----
75	Kitchenware		Book/Small Box	-----
76	Kitchenware		Book/Small Box	-----
77	Kitchenware		Book/Small Box	-----
78	Kitchenware		Book/Small Box	-----
79	Kitchenware		Book/Small Box	-----
80	Kitchenware		Book/Small Box	-----
81	Kitchenware		Book/Small Box	-----
82	Kitchenware		Book/Small Box	-----
83	Kitchenware		Book/Small Box	-----

Shipper Signature on packing

Shipper: OHAYON SHOVAL

30 Oct 2024

Foreman Signature on packing

Foreman: Ilya Musienko

A. Univers Transit Ltd.

Shipper Signature on delivery

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Delivery Driver Signature

Name: \_\_\_\_\_

Company: \_\_\_\_\_



84	Kitchenware		Book/Small Box	-----
85	Kitchenware		Book/Small Box	-----
86	Kitchenware		Book/Small Box	-----
87	Kitchenware		Book/Small Box	-----
88	Kitchenware		Book/Small Box	-----
89	Kitchenware		Book/Small Box	-----
90	Kitchenware		Book/Small Box	-----
91	Decorations		Wrapped	-----
92	Decorations		Wrapped	-----
93	Decorations		Wrapped	-----
94	Decorations		Wrapped	-----
95	Kitchenware		Book/Small Box	-----
96	Kitchenware		Book/Small Box	-----
97	Kitchenware		Book/Small Box	-----
98	Kitchenware		Book/Small Box	-----
99	Mattress		Wrapped	-----
100	Bed single		Wrapped	-----
101	Chair		Wrapped	-----
102	Chair		Wrapped	-----
103	Bed Kids		Wrapped	-----
104	Bed Kids		Wrapped	-----
105	Bed Kids		Wrapped	-----
106	Bed Kids		Wrapped	-----
107	Bed Kids		Wrapped	-----
108	Pillows		Large Box	-----
109	Towels		Medium Box	-----
110	Toys		Large Box	-----
111	Toys		Large Box	-----
112	Toys		Large Box	-----
113	Shoes		Medium Box	-----
114	Shoes		Medium Box	-----
115	Decorations		Wrapped	-----
116	Bed Kids		Wrapped	-----
117	Toys		Large Box	-----
118	Chair		Wrapped	-----
119	Bathroom items		Medium Box	-----
120	Toys		Large Box	-----
121	Decorations		Wrapped	-----
122	Books		Wrapped	-----
123	Photo Albums		Book/Small Box	-----
124	Suitcase		Wrapped	-----
125	Suitcase		Wrapped	-----
126	Suitcase		Wrapped	-----
127	Suitcase		Wrapped	-----
128	Suitcase		Wrapped	-----
129	Suitcase		Wrapped	-----
130	Suitcase		Wrapped	-----
131	Suitcase		Wrapped	-----
132	Suitcase		Wrapped	-----
133	Suitcase		Wrapped	-----

Shipper Signature on packing

Shipper: OHAYON SHOVAL

30 Oct 2024

Foreman Signature on packing

Foreman: Ilya Musienko

A. Univers Transit Ltd.

Shipper Signature on delivery

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Delivery Driver Signature

Name: \_\_\_\_\_

Company: \_\_\_\_\_



**A. UNIVERS  
TRANSIT** Ltd.  
Cargo Packing & Logistics

134	Bathroom items	Medium Box	-----
135	Safe	Wrapped	-----
136	Stand	Wrapped	-----
137	Documents	Wrapped	-----
138	Suitcase	Wrapped	-----
139	Glass	Wrapped	-----
140	Night Table	Wrapped	-----
141	Table	Wrapped	-----
142	Table	Wrapped	-----
143	Decorations	Wrapped	-----
144	Picture	Flat Box	-----
145	Picture	Flat Box	-----
146	Decorations	Wrapped	-----
147	Glass Shelves	Wrapped	-----
148	Kitchenware	Book/Small Box	-----
149	Glass Shelves	Wrapped	-----
150	Glass Shelves	Wrapped	-----
151	Glass Shelves	Wrapped	-----
152	Decorations	Wrapped	-----
153	Carpet	Wrapped	-----
154	Decorations	Wrapped	-----
155	Decorations	Wrapped	-----
156	Decorations	Wrapped	-----
157	Carpet	Wrapped	-----
158	TV Stand	Wrapped	-----
159	Photo Albums	Book/Small Box	-----
160	Mattress	Wrapped	-----
161	Bed, Double Size	Wrapped	-----
162	Bed, Double Size	Wrapped	-----
163	Decorations	Wrapped	-----
164	Decorations	Wrapped	-----
165	Decorations	Wrapped	-----
166	Parts	Wrapped	-----
167	Pillows	Large Box	-----
168	Clothes	Medium Box	-----
169	Lamp, Floor or Pole	Wrapped	-----
170	Table	Wrapped	-----
171	Shelves	Wrapped	-----
172	Shelves	Wrapped	-----
173	Shelves	Wrapped	-----
174	Shelves	Wrapped	-----
175	Shelves	Wrapped	-----
176	Decorations	Wrapped	-----
177	Decorations	Wrapped	-----
178	Chair	Wrapped	-----
179	Chair	Wrapped	-----
180	Chair	Wrapped	-----
181	Decorations	Wrapped	-----
182	Chair	Wrapped	-----
183	Chair	Wrapped	-----

Shipper Signature on packing

Shipper: OHAYON SHOVAL

30 Oct 2024

Foreman Signature on packing

Foreman: Ilya Musienko

A. Univers Transit Ltd.

Shipper Signature on delivery

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Delivery Driver Signature

Name: \_\_\_\_\_

Company: \_\_\_\_\_



184	Chair		Wrapped	-----
185	Chair		Wrapped	-----
186	Chair		Wrapped	-----
187	Chair		Wrapped	-----
188	Bed, Double Size		Wrapped	-----
189	Bed, Double Size		Wrapped	-----
190	Shelves		Wrapped	-----
191	Sofa Bed		Wrapped	-----
192	Pillows		Large Box	-----
193	Shelves		Wrapped	-----
194	Decorations		Wrapped	-----
195	Decorations		Wrapped	-----
196	Chair		Wrapped	-----
197	Chair		Wrapped	-----
198	Stand		Wrapped	-----
199	Stand		Wrapped	-----
200	Decorations		Wrapped	-----
201	Bathroom items		Medium Box	-----
202	Bed single		Wrapped	-----
203	Bed single		Wrapped	-----
204	Bed single		Wrapped	-----
205	Corner Shelf		Wrapped	-----
206	Ladder		Wrapped	-----
207	Decorations		Wrapped	-----
208	Decorations		Wrapped	-----
209	Parts		Wrapped	-----

**Total Number of Packages: 209**

**Used Boxes Count**

Box Type	Quantity
Book/Small Box	51
Large Box	16
Medium Box	12
Flat Box	3
Wrapped	127

Shipper Signature on packing

Shipper: OHAYON SHOVAL

30 Oct 2024

Foreman Signature on packing

Foreman: Ilya Musienko

A. Univers Transit Ltd.

Shipper Signature on delivery

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Delivery Driver Signature

Name: \_\_\_\_\_

Company: \_\_\_\_\_



## ISF Information

ISF Number MSW-15777238332	Reference Number 307848	ISF Type ISF-10
Importer		Consignee
Shipment Type 03 - Household Goods/Personal Effects		
		Time Accepted 11/20/24 6:49:35 AM

<b>Bills of Lading</b>		
Carrier:	Mode of Transportation: Vessel, Container	Master Bill: OOCL 2304620070
Bill Type	Bill Number	Bill on File
House Bill	OOLU 230462007002	

<b>Selling Party</b>
OHAYON SHOVAL Street Number: 32 Street Name: DAVID HAMELECH OR HAKIVA, IL

<b>Buying Party</b>
OHAYON SHOVAL Street Number: 400 Street Name: SUNNY ISLES BLVD`` SUNNY ISLES BEACH, FL 33160, US

<b>Ship to Party</b>
OHAYON SHOVAL Street Number: 400 Street Name: SUNNY ISLES BLVD`` SUNNY ISLES BEACH, FL 33160, US

<b>Container Stuffing Location</b>
UNIVERS TRANSIT Street Number: 14 Street Name: HAHADARIM ASHDOD, IL

<b>Consolidator</b>
UNIVERS TRANSIT Street Number: 14 Street Name: HAHADARIM ASHDOD, IL

<b>Manufacturer</b>		
OHAYON SHOVAL Street Number: 32 Street Name: DAVID HAMELECH OR HAKIVA, IL		
Part Number	Tariff Number	Country of Origin
	980400	IL

<b>Consignee</b>
OHAYON SHOVAL
DUNS/DUNS+4: 22537290



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

OMB APPROVAL NO. 1651-0014  
EXPIRES: 11-30-2022  
ESTIMATED BURDEN: 45 MIN.

**DECLARATION FOR FREE ENTRY OF UNACCOMPANIED ARTICLES**

19 CFR 148.6, 148.52, 148.53, 148.77

Paperwork Reduction Act Statement: An agency may not conduct or sponsor an information collection and a person is not required to respond to this information unless it displays a current valid OMB control number and an expiration date. The control number for this collection is 1651-0014. The estimated average time to complete this application is 45 minutes. The obligation to respond to this information collection is mandatory to obtain benefits. If you have any comments regarding the burden estimate you can write to CBP PRA Officer, U.S. Customs and Border Protection, Office of Regulations and Rulings, 10th floor, 90K Street NE., Washington DC 20229-1177.

**PART I -- TO BE COMPLETED BY ALL PERSONS SEEKING FREE ENTRY OF ARTICLES** (Please consult with the CBP official for additional information or assistance. REMEMBER--All of your statements are subject to verification. False declarations or failure to declare articles could result in penalties.)

1. IMPORTER'S NAME (Last, first and middle initial) <b>Shoval Ohayon</b>		2. IMPORTER'S DATE OF BIRTH <b>06/23/1997</b>	3. IMPORTER'S DATE OF ARRIVAL <b>OCT 22th</b>
4. IMPORTER'S U.S. ADDRESS <b>400 Sunny Isles Blvd #1905, Sunny Isles Beach, FL 33160</b>		5. IMPORTER'S PORT OF ARRIVAL <b>Miami</b>	
		6. NAME OF ARRIVING VESSEL CARRIER AND FLIGHT/TRAIN <b>EL AL</b>	
7. NAME(S) OF ACCOMPANYING HOUSEHOLD MEMBERS (wife, husband, minor children, etc.)			

8. THE ARTICLES FOR WHICH FREE ENTRY IS CLAIMED BELONG TO ME AND/OR MY FAMILY AND WERE IMPORTED	A. DATE	B. NAME OF VESSEL/CARRIER	C. FROM (Country)	D. B/L OR AWB OR I.T. NO.
E. NUMBER AND KINDS OF CONTAINERS	F. MARKS AND NUMBERS			

**PART II -- TO BE COMPLETED BY ALL PERSONS EXCEPT U.S. PERSONNEL AND EVACUEES**

9. RESIDENCY ("X" appropriate box) I declare that my place of residence abroad <input type="checkbox"/> is <input checked="" type="checkbox"/> was	A. NAME OF COUNTRY <b>Israel</b>	B. LENGTH OF TIME <b>1</b> Yr. <b></b> Mo.
C. RESIDENCY STATUS UPON MY/OUR ARRIVAL ("X" One) <input type="checkbox"/> (1) Returning resident of the U.S. <input type="checkbox"/> (2) Nonresident: <input type="checkbox"/> a. Emigrating to the U.S. <input type="checkbox"/> b. Visiting 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):

<b>A. Applicable to RESIDENT and NONRESIDENT</b>	<b>C. Applicable to NONRESIDENT ONLY</b>
<input type="checkbox"/> (1) All household effects acquired abroad for which free entry is sought were used abroad for at least one year by me or my family in a household of which I or my family was a resident member during such period of use, and are not intended for any other person or for sale. (9804.00.05, HTSUSA)	<input type="checkbox"/> (1) All household effects acquired abroad for which free entry is sought were used abroad for at least one year by me or my family in a household of which I or my family was a resident member during such period of use, and are not intended for any other person or for sale. (9804.00.05, HTSUSA)
<input type="checkbox"/> (2) All instruments, implements, or tools of trade, occupation or employment, and all professional books for which free entry is sought were taken abroad by me or for my account or I am an emigrant who owned and used them abroad. (9804.00.10, 9804.00.15, HTSUSA)	<input type="checkbox"/> (2) Any vehicles, trailers, bicycles or other means of conveyance being imported are for the transport of me and my family and such incidental carriage of articles as are appropriate to my personal use of the conveyance. (9804.00.35, HTSUSA)
<b>B. Applicable to RESIDENT ONLY</b>	
<input type="checkbox"/> All personal effects for which free entry is sought were taken abroad by me or for my account. (9804.00.45, HTSUSA)	

**PART III -- TO BE COMPLETED BY U.S. PERSONNEL AND EVACUEES ONLY**

I, the undersigned, the owner, importer, or agent of the importer of the personal and household effects for which free entry is claimed, hereby certify that they were in direct personal possession of the importer, or of a member of the importer's family residing with the importer, while abroad, and that they were imported into the United States because of the termination of assignment to extended duty (as defined in section 148.74(d) of the Customs Regulations) at a post or station outside the United States and the CBP Territory of the United States, or because of Government orders or instructions evacuating the importer to the United States; and that they are not imported for sale or for the account of any other person and that they do not include any alcoholic beverages or cigars. Free entry for these effects is claimed under Subheading No. 9805.00.50, Harmonized Tariff Schedule of the United States.

1. DATE OF IMPORTER'S LAST DEPARTURE FROM THE U.S.	2. A COPY OF THE IMPORTER'S TRAVEL ORDERS IS ATTACHED AND THE ORDERS WERE ISSUED ON:
--	--

**PART IV -- TO BE COMPLETED BY ALL PERSONS SEEKING FREE ENTRY OF ARTICLES** (Certain articles may be subject to duty and/or other requirements and must be specifically declared herein. Please check all applicable items and list them separately in item D on the reverse.)

<b>A. For U.S. Personnel, Evacuees, Residents and Non-Residents</b>	<b>B. For Residents and Non-Residents ONLY</b>
<input type="checkbox"/> (1) Articles for the account of other person.	<input checked="" type="checkbox"/> (7) Foreign household effects acquired abroad and used less than one year.
<input type="checkbox"/> (2) Articles for sale or commercial use.	<input checked="" type="checkbox"/> (8) Foreign household effects acquired abroad and used more than one year.
<input type="checkbox"/> (3) Firearms and/or ammunition.	<b>C. For Resident ONLY</b>
<input type="checkbox"/> (4) Alcoholic articles of all types or tobacco products.	<input type="checkbox"/> (9) Personal effects acquired abroad.
<input type="checkbox"/> (5) Fruits, plants, seeds, meats, or birds.	<input type="checkbox"/> (10) Foreign made articles acquired in the United States and taken abroad on this trip or acquired abroad on another trip that was previously declared to CBP
<input type="checkbox"/> (6) Fish, wildlife, animal products thereof.	<input type="checkbox"/> (11) Articles taken abroad for which alterations or repairs were performed abroad.

22537290