

**SUPPLEMENTAL DECLARATION TO CF 3299
FOR UNACCOMPANIED AND HOUSEHOLD EFFECTS**

1. Owner of Household Goods
Name (Last, First and Middle)

2. Date of Birth

3. Country of Citizenship

4. Passport Number

5. Social Security Number

6. Resident Alien Number

7. US Address

8. Foreign Address

9. Reason For Moving

10. Employer

11. Position with Company

12. Length of Employment

13. Nature of Business

14. Name and Telephone Number of Company
Office for Verification of Above

15. Name and Address of Freight
Forwarder/Packers/Shipping Agent

16. Shipping Itinerary

17. Certification of (Check One)

Authorized Agent

Importer

Signature

Date