

## DEPARTMENT OF THE TREASURY UNITED STATES CUSTOMS SERVICE

19 CFR 1	22.27, 148.12,		0,148.111, 1498; 31	The second second		OME	RM-APPROV NO. 1515-00	041
Each an	rriving trav	eler or resp	onsible family ten declaration	memb	per must	provide th	ne followi	ng
	nily Name	Becommence	ten declaration	i pei i	anniy is	required).		
	First (Given) Mid							-
2. Bir	th date	Day	Month		Year			
3. Nu	mber of Fa	mily mem	bers traveling	with y	ou	A	NESS CONTROL	
4. (a)	U.S. Street	Address (	hotel name/des	tinatio	on)			
(b)	(b) City (c) S							
5. Pas	sport issue	ed by (cour	ntry)			***************************************		_
6. Pas	sport num	iber						
7. Co.	intry of Re	esidence						
8. Co	untries vis	ited on this	s					
trip	prior to U	.S. arrival	No.					
9. Airl	ine/Flight	No. or Ve	ssel Name					
10. The	e primary p	ourpose of t	this trip is busi	ness:		Yes	No	
	n (We are)							
		ts, food, ins				Yes Yes	No	_
	(b) meats, animals, animal/wildlife products:						No	
			tures, snails:			Yes	No	_
			farm/ranch/pa			Yes	No	600
			close proximity ling) livestock			Yes	No	200
12 A	The same of the sa		rrency or mo		7			
			U.S. or foreign	ALCOHOL: CHARLE		Yes	No	
(arti	4. I have (We have) commercial merchandise:  (articles for sale, samples used for soliciting orders, or goods that are not considered personal effects)						No	
15.Res mer for	idents —	the tota I/we have else, but no	l value of a purchased or titems mailed	ll goo	ods, in red abr	oad, (incl	uding gif	ts
Visi	tors — th	ne total va mercial mer	lue of all arti	cles t	hat will	remain in	n the U.S	S.,
	ne instructi ou must de		back of this fo	rm. S		provided to	list all th	ne
			NT INFORMATION AT THE A TRUTHFU				E SIDE O	F
Y								

(Signature)

For Official Use Only

Date (day/month/year)