



Customs Declaration

FORM APPROVED

19 CFR 122.27, 148.12, 148.13, 148.110, 148.111, 148.31 CFR 529

CMB NO. 1001-0009

Each arriving traveler or responsible family member must provide the following information (only ONE written declaration per family is required):

1. Family Name: 

First (Given)	<input type="text"/>		Middle	<input type="text"/>
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2. Birth date: Day   Month   Year
3. Number of Family members traveling with you:
4. (a) U.S. Street Address (hotel name/destination):
- (b) City:
- (c) State:
5. Passport issued by (country):
6. Passport number:
7. Country of Residence:
8. Countries visited on this trip prior to U.S. arrival:
9. Airline/Flight No. or Vessel Name:
10. The primary purpose of this trip is business: Yes  No
11. I am (We are) bringing:
 

(a) fruits, vegetables, plants, seeds, food, insects:	Yes <input type="checkbox"/>	No <input type="checkbox"/>
(b) meats, animals, animal/wildlife products:	Yes <input type="checkbox"/>	No <input type="checkbox"/>
(c) disease agents, cell cultures, swabs:	Yes <input type="checkbox"/>	No <input type="checkbox"/>
(d) soil or have been on a farm/ranch/pasture:	Yes <input type="checkbox"/>	No <input type="checkbox"/>
12. I have (We have) been in close proximity of (such as touching or handling) livestock: Yes  No
13. I am (We are) carrying currency or monetary instruments over \$10,000 U.S. or foreign equivalent: Yes  No   
(see definition of monetary instruments on reverse)
14. I have (We have) commercial merchandise: Yes  No   
(articles for sale, samples used for soliciting orders, or goods that are not considered personal effects)
15. Residents — the total value of all goods, including commercial merchandise I/we have purchased or acquired abroad, (including gifts for someone else, but not items mailed to the U.S.) and am/are bringing to the U.S. is: \$
- Visitors — the total value of all articles that will remain in the U.S., including commercial merchandise is: \$

Read the instructions on the back of this form. Space is provided to list all the items you must declare.

I HAVE READ THE IMPORTANT INFORMATION ON THE REVERSE SIDE OF THIS FORM AND HAVE MADE A TRUTHFUL DECLARATION.

**X** \_\_\_\_\_  
(Signature) Date (day/month/year)

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