OMB APPROVAL NO. 1405-0064 EXPIRATION DATE: 08-31-2002 ESTIMATED BURDEN: 20 MINUTES\*

THE PROPERTY AND ADDRESS AND A	FOR OFFICIAL USE ONLY		
U.S. DEPARTMENT OF STATE	□ P □ R		
NOTIFICATION OF APPOINTMENT OF HONORARY CONSULAR OFFICER	_ A		
TO: Secretary of State, Attention - Office of Protocol	PID Recognition Date (mm-dd-yyyy)		
1. FROM (Name of Embassy/Mission)	2. TYPE OF HONORARY CONSULAR OFFICER		
s. II. grandinges both gelightens sing some of the other and secure	CONSUL GENERAL VICE CONSUL OTHER		
CONTACT NAME AND TELEPHONE NO.	CONSUL CONSULAR AGENT		
3. FULL NAME	A or element to the tracementary provided on this inem should be		
(a) SURNAME (Last)	(b) GIVEN (First) (c) MIDDLE		
(d) PREFIX (e) SUFFIX (f) MAIDEN	(g) OTHER MALE FEMALE		
Is the correct sequence for printing name a, b, c, e? YES	NO. If No, give correct sequence:		
ABBREVIATED			
NAME:  Please indicate how name should appear on identification cards. Sur	roome first. An identification pard will be issued automatically		
CURRENT CITIZENSHIP	5. DATE OF BIRTH (mm-dd-yyyy)		
6. CITIZENSHIP AT BIRTH	7. PLACE OF BIRTH (City, Country)		
8. HONORARY CONSULATE ADDRESS (Do Not Use Post Office Box)  9. RESIDENCE ADDRESS (Do Not Use Post Office Box)			
NAME OF OFFICE	NUMBER STREET (AVE., BLVD., PLACE, ETC.) APT.		
NUMBER STREET (AVE., BLVD., PLACE, ETC.) SUITE	CITY STATE ZIP		
CITY STATE ZIP			
pinte on availant it	TELEPHONE 114 H.O. PEOLOGICA CTATUS		
TELEPHONE EXT.  10. DATE OF ENTRY ON DUTY (mm-dd-yyyy)	11. U.S. RESIDENCE STATUS  UNITED STATES CITIZEN		
10. BATE OF ENTITY ON BOTT (JULIA MARY)	PERMANENT RESIDENT ALIEN A		
12. EXPECTED DATE OF TERMINATION (mm-yyyy)	13. NAME, TITLE AND PID OF PREDECESSOR AND DATE OF TERMINATION		
14. CURRENT OCCUPATION OR PROFESSION	15. WILL APPLICANT BE HEAD OF POST?		
ma))	YES NO		
16. HAS APPLICANT EVER HELD A PREVIOUS HONORARY CONSULAR POSITION?	17. BUSINESS ADDRESS (Do Not Use Post Office Box)		
YES NO (If "YES", when, what title, what country and where?)	NAME OF OFFICE		
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and the state of t	CITY STATE ZIP		
reducing to at Survey with a survey of such survey and so that	TELEPHONE EXT.		
18. ATTACH CURRICULUM VITAE OR LIST ALL ASSIGNMENTS/POSIT	TELEPHONE EXT.		

10 CONFLICT OF WITEREST IT				
19. CONFLICT OF INTEREST (To be a	nswered by applicant)			
a. (1) Do you hold a position of p	profit or trust with the Federal Government?			
	If answer is "Yes", identify the branch and position	held.		
	(Attach description of duties performed.)			
	Three color philographic [2]			
(2) Do you hold an office with	a state, county, or municipal government in the Un	nited States?		
No Yes If "Yes", attach description of duties performed and include letter from the state, county, or municipality stating that your position is not incompatible with the duties of a foreign consular officer, and that they have no objection to your consular appointment.				
b. Are you				
(1) A retired member of the un	iformed services of the United States (meaning the Service, or the commissioned corps of the National	Armed Forces, the commission Oceanic and Atmospheric Adm	ned Regular and Reserve ninistration)?	
No Yes If "Yes", state which:				
(2) A member of a reserve component of the armed forces of the United States (meaning the Army, Navy, Air Force, Marine Corps, or Coast Guard)?				
No Yes If "Yes", attach copy of letter of permission from the Secretary of the Department concerned.				
(3) A member of the Commissioned Reserve Corps of the United States Public Health Service?				
□ No □ Yes				
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	Intentional provision of false information on this form violates United States law (Title 18 U.S. Code, Section 1001) and will be considered a violation of the international legal obligation of foreign missions and their personnel to respect the laws of the receiving state (Vienna Convention on Consular Relations, 1963, Article 55).			
	Attach 3 recent color photographs ANY CHANGES IN THIS INFORMATION MUST BE REPORTED IMMEDIATELY			
priotographis	photographs ANY CHANGES IN THIS INFORMATION MUST BE REPORTED IMMEDIATELY TO THE OFFICE OF PROTOCOL (USE FORM DS-2006, NOTIFICATION OF CHANGE)			
2" × 2"	SIGNATURE OF APPLICANT	DATE (mm-dd-yyyy)	OF THE STREET, IN	
ANS INDEPENDENT SERVICE	Tribling richer with Cappenia many the		IN NEW TOWN THE	
Print name and mission on back of each photo	TYPED NAME AND SIGNATURE OF CHIEF OF	DATE ( //)	(Embassy Seal)	
	MISSION OR DEPUTY	DATE (mm-dd-yyyy)	de Labbasia nom	
		THE PROPERTY OF STREET	AT A MANUAL BELL BELLEVILLE TO	
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The Privacy Act of 1974, as amended, 5 U.S.C. 552a, contains provisions regarding the maintenance, collection, use, and dissemination of information about United States citizens and aliens lawfully admitted for permanent residence in the United States. The following information is provided in accordance with subsection (e)(3) of the Privacy Act.

AUTHORITIES: Vienna Convention on Diplomatic Relations of 1961; Vienna Convention on Consular Relations of 1963; Diplomatic Relations Act (22 U.S.C. 254a-e); International Organizations Immunities Act (22 U.S.C. 288e(a)).

PURPOSE: The principal purpose for the collection of this information is to implement various provisions of the above-cited authorities which are

predicated upon acceptance by the Department of State.

ROUTINE USES: The principal users of this information are offices within the Department of State, including but not limited to, the Office of Protocol, the Office of Foreign Missions, and the Office of Visa Services. In response to inquiries from law enforcement agencies, the Office of Protocol may confirm status as recognized by the Department of State. Information may also be provided to other government agencies having statutory or other lawful authority to maintain such information. Names of Consular Officers, titles, and office addresses are published semiannually in Foreign Consular Offices in the United States, Department of State Publication 10277.

Submission of these forms is mandatory. Failure to provide any of the requested information may prevent acceptance and the extension of benefits to principals or family members as provided in the above-cited authorities.

\*Public reporting burden for this collection of information is estimated to average 20 minutes per response, including time required for searching existing data sources, gathering the necessary data, providing the information required, and reviewing the final collection. In accordance with 5 CFR 1320.5(b), persons are not required to respond to the collection of this information unless this form displays a currently valid OMB control number. Send comments on the accuracy of this estimate of the burden and recommendations for reducing it to: Department of State (A/RPS/DIR) Washington, D.C. 20520-1849, and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

## **INSTRUCTIONS FOR COMPLETING FORM DS-2005,** NOTIFICATION OF APPOINTMENT OF HONORARY CONSULAR OFFICER

Please Read All Instructions Before Completing This Form.

This form is to be completed for all honorary consular officers. All questions should be answered completely and accurately. If a question does not apply, please type "N/A."

Any changes in the information provided on this form should be reported to the Office of Protocol as soon as possible using the Notification of Change, Form DS-2006.

the Nothication of Change, Form DS-2000.	
The instructions below are numbered to correspond to the r	numbered items on the form. Please TYPE all answers.
1 Enter the name of the Embassy or Mission submitting the form. Give telephone number of office which can be	9 Enter complete home address, and telephone number of the honorary consular officer. (If same as item 8, so state.)2.
contacted for further information, if necessary.  2 Enter an "X" in the box to indicate the type of honorary consular officer being appointed	NOTE: All addresses must be street addresses, including type, e.g. Street, Ave., Blvd., etc., not post office box numbers, and must include ZIP codes and telephone area
3 Enter the honorary consular officer's full name in the order specified: (a) surname or family name; (b) first name or given name; (c) middle name; (d) prefix such as Mr., Mrs., Ms., or Miss, or title; (e) suffix, such as Jr. or Sr.; (f)	codes.  10 Enter date (mm-dd-yyyy) officer will assumed official duties in the United States. NOTE: Honorary consuls may not be perform consular duties until they have been recognized by the Department of State
maiden name, and (g) any other name used. Type "X" to indicate if male or female.  NOTE: Names on identification cards will be printed: last, first, middle, in the order of a, b, c, e, on No. 3 of the form. If this is not the correct sequence for the officer's name, indicate correct sequence in the space provided.	Enter "X" in box indicating current residence Status of honorary consul in the United States. (Only U.S. Citizens or permanent resident aliens may serve as honorary consuls.)  12 Enter the date (mm-yyyy), (approximate) that officer will terminate duties. (If unknown, so state)
(Example: f, b, g, e). Due to space limitations it may not be possible to include all names on identification cards. In the block spaces after "Abbreviated Name" type the officer's name as it should appear on identification card, using no	13 Enter name, title and Personal Identification Number (PID), if available, of the person the officer is replacing. If new position, so state 14 Enter current occupation of honorary consular officer.
more than 34 spaces, and allowing spaces for commas and periods.  NOTE: The abbreviated name, if used, will appear in all	15 Enter "X" in box if officer will be the head of a post. Reminder: Honorary consular officers may not head career posts.
publications and documents issued by the U.S. Department of State.	16 Enter "X" in box if officer has previously held any honorary consula position with any foreign government. Indicate periods, title, country, and location.
4 Enter present nationality.  5 Enter officer's date of birth (mm-dd-yyyy).	Enter the complete business address, including the name of the business or company, of the honorary consular officer. (If same as item 8, so state.)
6 Enter nationality at birth, even if the same as No. 4.  7 Enter officer's place of birth - city and country or state.	18 Enter the dates (mm-yyyy), nature of employment (job title and employer), and place (city and state) of academic study or
8 Enter the name, address and telephone number of the honorary consular officer, or career consulate, if the honorary consular officer is to be attached to a career office.	other activities for previous 10 years, starting from the most recent position. (Attach additional sheet, if necessary. or curriculum vitae may be substituted).

19 The Emoluments Clause, Article I, Section 9, clause 8 of the United States Constitution, provides: "...No person holding any Office of Profit or Trust under them [the United States], shall, without the consent of the Congress, accept of any present, Emolument, Office, or Title, of any kind whatever from any King, Prince, or foreign State."

The U.S. Code of Federal Regulations, Volume 22, Chapter 1, Part 3a, provides that Congress consents to the following persons accepting civil employment from a foreign government, only if the Secretary of the Department concerned and the Secretary of State have approved the employment.

- 1) Retired members of the uniformed services.
- 2) Members of a reserve component of the armed forces.
- 3) Members of the Commissioned Reserve Corps of the Public Health Service.

Thus, for example, a retired U.S. Army officer must obtain written approval from the Secretary of the Army in order to take a position as an honorary consular officer of a foreign.

state. Requests to the Secretary must contain information concerning the applicants status, and the nature the proposed employment in as much detail as possible.

If the answer to any question is YES, please attach requested documentation.

Three color photographs (2" x 2") of the officer should be affixed to the form. Photographs should have been taken within the past 12 months. Print full name and foreign mission on the back of each photo. (Only honorary consular officers are issued identification documents. Please do not include photos of spouses and dependents.)

The applicant for the position of honorary consular officer must sign and date (mm-dd-yyyy) the form. The form must be signed and dated by the designated approving embassy official, and the official embassy seal must be affixed.

Submit all forms and attachments to

Office of Protocol U.S. Department of State Production Unit, State Annex 33 3507 International Place, N.W. Washington, D.C. 20008-3034

ANY CHANGES IN THIS INFORMATION SHOULD BE REPORTED TO THE OFFICE OF PROTOCOL USING NOTIFICATION OF CHANGE, FORM DS-2006.