

**DECLARATION OF UNACCOMPANIED ARTICLES**

19 CFR 145.12, 145.43, 148.110, 148.113-148.116

The arriving traveler or head of a family must complete a **SEPARATE** CBP Form 255 for **EACH** unaccompanied package or container sent from American Samoa, Guam, or the U.S. Virgin Islands. **PLEASE PRINT** the information in blocks 1-8 and **SIGN block 9.**

|  |  |            |                |  |                                    |
|--|--|------------|----------------|--|------------------------------------|
| 1. FAMILY NAME   |  | GIVEN NAME | MIDDLE INITIAL | 2. NUMBER OF FAMILY MEMBERS INCLUDED IN FAMILY DECLARATION |                                    |
| 3. PERMANENT ADDRESS   |  |            |                | 4. DATE OF ARRIVAL   | 5. VESSEL, OR AIRLINE & FLIGHT NO. |
|  |  |            |                | 6. PORT OF ARRIVAL   |                                    |
| 7. DESCRIPTION OF ARTICLE(S) IN PACKAGE  |  |            | 8. PRICE       | 10. CBP USE ONLY (After arrival of traveler)               |                                    |
|  |  |            |                | <b>SAMPLE</b>  |                                    |
|  |  |            |                |  |                                    |
|  |  |            |                |  |                                    |
|  |  |            |                |  |                                    |
| 9. I declare that the above articles were acquired in American Samoa, Guam or the U.S. Virgin Islands by me or those members of my family included in my declaration. I further declare that the above information is valid and correct to the best of my knowledge and belief. I will pay any customs duties and internal revenue taxes which are found to be due upon arrival of the articles. |  |            |                | 11. CBP OFFICER SIGNATURE                                  |                                    |
| SIGNATURE <b>X</b>   |  |            |                | DATE   |                                    |

**WARNING  
FALSE CLAIMS ARE PUNISHABLE BY LAW**

|  |  |   |                                |
|--|--|---|--------------------------------|
| <b>IMPORTANT</b>   |  | <b>CBP USE ONLY (After arrival of article)</b>      |                                |
| IMPORTER:  | To receive your entitled exemptions and appropriate rates of duty, you must <u>send the yellow copy of CBP Form 255 to the vendor immediately after customs validation</u> (Blocks 10 and 11).                       | 12. ARRIVAL DATE                                    | 13. MAIL OR INFORMAL ENTRY NO. |
| VENDOR:  | 1. Enclose this form in an envelope marked "CBP Form 255 enclosed" and securely attach it to the outside of the package or container.<br>2. Mark the package or container " <b>Unaccompanied Tourist Shipment.</b> " | 14. RELEASE DATE                                    | 15. CBP OFFICER                |
| 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- 0030. The estimated average time to complete this application is 5 minutes. If you have any comments regarding the burden estimate you can write to U.S. Customs and Border Protection, Office of Regulations and Rulings, 799 9 <sup>th</sup> Street, NW., Washington DC 20229. |  | 16. DISCREPANCIES BETWEEN CBP FORM 255 AND SHIPMENT |                                |