# U.S. CUSTOMS AND BORDER PROTECTION
# AMERICAN EMBASSY – ROME, ITALY

## REQUEST FORM FOR TRANSPORTATION LETTER

1. NAME: _____

2. PLACE OF BIRTH: _____

3. DATE OF BIRTH: _____

4. U.S. ADDRESS: _____

5. DATE OF LAST DEPARTURE FROM U.S.: _____

6. DATE OF INTENDED REENTRY INTO THE U.S.: _____

7. GREEN CARD (ALIEN REGISTRATION CARD) NUMBER: _____

8. CARD WAS: (circle one) LOST STOLEN LEFT IN U.S. OTHER _____

9. DATE AND PORT OF FIRST ENTRY INTO THE U.S. AS A PERMANENT RESIDENT:

_____

10. PASSPORT NUMBER: _____

11. FATHER'S FIRST NAME: _____

12. MOTHER'S FIRST NAME: _____

13. SEX: _____ HEIGHT _____ HAIR COLOR _____ EYE COLOR _____

14. WEIGHT_____ Race: _____ SCARS/MARKS _____

15. PHONE NUMBER IN ITALY: _____

SIGNATURE: _____ DATE: _____