

 <b>MEDITERRANEAN SHIPPING COMPANY S.A.</b> 12-14, chemin Rieu, 1208 GENEVA, Switzerland Website : www.msc.com	<b>SEA WAYBILL No. MEDUHA374196</b> <b>NON-NEGOTIABLE COPY</b>		"Port-to-Port" or "Combined Transport" (see Clause 1)
	SCAC Code: MSCU	NO. & SEQUENCE OF ORIGINAL B/L's 1/1	NO OF RIDER PAGES 0

SHIPPER: <b>LEVRAN SHALEV</b> 4 HAZOHAR STREET SHOHAM ISRAEL Tel:088563145, EMAIL:ruthl@univers-transit.co.il	CARRIER'S AGENTS ENDORSEMENTS: (Include Agent(s) at POD) FCL/FCL Lloyds / IMO Number = 9304435 Due to danger of confiscation, warranted vessel is not to call at ports and not to enter the territorial waters of any Arab countries belligerent to the state of Israel and/or actively supporting the Arab boycott prior to unloading in Israel unless in distress or subject to force majeure SHIPPED ON BOARD QUANTITIES & CONTENTS UNKNOWN & NOT TALLIED OF CONTROLLED BY CARRIER
CONSIGNEE: This B/L is not negotiable unless marked "To Order" or "To Order of..." here. <b>LEVRAN SHALEV</b> EAST GALBRAITH RD CINCINNATI UNITED STATES 45236	
NOTIFY PARTIES: (No responsibility shall attach to the Carrier or to his Agent for failure to notify - see Clause 20) <b>ISAAC'S MOVING AND STORAGE</b> 181 Campanelli Parkway STOUGHTON UNITED STATES 02072 Tel:17814364751, Fax:17814364688 EMAIL:rceline@isaacsmoving.com	

VESSEL & VOYAGE NO. (see Clauses 8 & 9) <b>MSC JOANNA V. IU932A</b>	PORT OF LOADING <b>HAIFA</b>	PLACE OF RECEIPT: (Combined Transport ONLY - see Clauses 1 & 5.2) XXXXXXXX
BOOKING REF. (or) SHIPPER'S REF. <b>BKIN1930643</b>	PORT OF DISCHARGE <b>NEW YORK</b>	PLACE OF DELIVERY: (Combined Transport ONLY - see Clauses 1 & 5.2) XXXXXXXX

**PARTICULARS FURNISHED BY THE SHIPPER - NOT CHECKED BY CARRIER - CARRIER NOT RESPONSIBLE (see Clause 14)**

Container Numbers, Seal Numbers and Marks	Description of Packages and Goods (Continued on attached Bill of Lading Rider page(s), if applicable)	Gross Cargo Weight	Measurement
MEDU5868523/20DV SEAL1/436600 Tare Wt :2220	SLAC - 2 PKGS USED HOUSEHOLD GOODS	KGS 1500.000	CBM 11.1200
Total Tare wgt. 2220 KGS Total Gross wgt. 1500.000 KGS Total Volume. 11.12 CBM			

FREIGHT & CHARGES Cargo shall not be delivered unless Freight & Charges are paid (see Clause 16). <b>FREIGHT PREPAID IN MEDUHA370798</b>	RECEIVED by the Carrier in apparent good order and condition (unless otherwise stated herein) the total number or quantity of Containers or other packages or units indicated in the box entitled Carrier's Receipt for carriage subject to all the terms and conditions hereof from the Place of Receipt or Port of Loading to the Port of Discharge or Place of Delivery, whichever is applicable. IN ACCEPTING THIS BILL OF LADING THE MERCHANT EXPRESSLY ACCEPTS AND AGREES TO ALL THE TERMS AND CONDITIONS, WHETHER PRINTED, STAMPED OR OTHERWISE INCORPORATED ON THIS SIDE AND ON THE REVERSE SIDE OF THIS BILL OF LADING AND THE TERMS AND CONDITIONS OF THE CARRIER'S APPLICABLE TARIFF AS IF THEY WERE ALL SIGNED BY THE MERCHANT.  If this is a negotiable (To Order / of) Bill of Lading, one original Bill of Lading, duly endorsed must be surrendered by the Merchant to the Carrier (together with outstanding Freight and charges) in exchange for the Goods or a Delivery Order. If this is a non-negotiable (straight) Bill of Lading, the Carrier shall deliver the Goods or issue a Delivery Order (after payment of outstanding Freight and charges) against the surrender of one original Bill of Lading or in accordance with the national law at the Port of Discharge or Place of Delivery whichever is applicable.  IN WITNESS WHEREOF the Carrier or their Agent has signed the number of Bills of Lading stated at the top, all of this tenor and date, and wherever one original Bill of Lading has been surrendered all other Bills of Lading shall be void.
DECLARED VALUE (only applicable if Ad Valorem Charges paid - see Clause 7.3) XXXXX	CARRIER'S RECEIPT (No. of Cntrs or Pkgs rcvd by Carrier - see Clause 14.1) 1 CNTR
PLACE AND DATE OF ISSUE HAIFA 20-AUG-2019	SHIPPED ON BOARD DATE 20-AUG-2019
SIGNED on behalf of the Carrier MSC Mediterranean Shipping Company S.A.  MSC (ISRAEL) LTD HAIFA	

3/9

305658







A. UNIVERS TRANSIT LTD.


BECAUSE WE CARE...

Shipper Name: Shalev Levran  
Packing Job Date: 16 Jun 2019  
Origin Address: Israel  
Destination Address:

### PACKING INVENTORY

No.	Description	Comment	Box Type	Room
1	Books		Book/Small Box	-----
2	Books		Book/Small Box	-----
3	Clothes		Medium Box	-----
4	Clothes		Medium Box	-----
5	Clothes		Medium Box	-----
6	Clothes		Medium Box	-----
7	Toys		Large	-----
8	Toys		Large	-----
9	Tool Box		Wrapped	-----
10	Books		Book/Small Box	-----
11	Books		Book/Small Box	-----
12	Books		Book/Small Box	-----
13	Books		Book/Small Box	-----
14	Books		Book/Small Box	-----
15	Books		Book/Small Box	-----
16	Books		Book/Small Box	-----
17	Books		Book/Small Box	-----
18	Books		Book/Small Box	-----
19	Books		Book/Small Box	-----
20	Books		Book/Small Box	-----

Owner Signature

  
\_\_\_\_\_  
\_\_\_\_\_

Company's Signature

  
\_\_\_\_\_  
\_\_\_\_\_




# A. UNIVERS TRANSIT LTD.


RELIABLE BY CARTEL

21	Books		Book/Small Box	-----
22	Sewing Machine		Wrapped	-----
23	Books		Book/Small Box	-----
24	Books		Book/Small Box	-----
25	Books		Book/Small Box	-----
26	Books		Book/Small Box	-----
27	Books		Book/Small Box	-----
28	Toys		Large	-----
29	Books		Book/Small Box	-----
30	Books		Book/Small Box	-----
31	Books		Book/Small Box	-----
32	Books		Book/Small Box	-----
33	Books		Book/Small Box	-----
34	Books		Book/Small Box	-----
35	Books		Book/Small Box	-----
36	Clothes		Medium Box	-----
37	Decorations		Wrapped	-----
38	Decorations		Wrapped	-----
39	Clothes		Medium Box	-----
40	Clothes		Medium Box	-----
41	Clothes		Medium Box	-----
42	Clothes		Medium Box	-----
43	Clothes		Medium Box	-----
44	Clothes		Medium Box	-----
45	Shoes		Medium Box	-----
46	Shoes		Medium Box	-----
47	Shoes		Medium Box	-----
48	Table		Wrapped	-----
49	chair		Wrapped	-----

Owner Signature

  
 \_\_\_\_\_  
 \_\_\_\_\_

Company's Signature

  
 \_\_\_\_\_  
 \_\_\_\_\_




# A. UNIVERS TRANSIT LTD.


БЮДЖЕТНОЕ ПР. ОБЩ.

50	chair		Wrapped	-----
51	chair		Wrapped	-----
52	chair		Wrapped	-----
53	chair		Wrapped	-----
54	chair		Wrapped	-----
55	chair		Wrapped	-----
56	Table	part of	Wrapped	-----
57	Kitchenware		Book/Small Box	-----
58	Kitchenware		Book/Small Box	-----
59	Kitchenware		Book/Small Box	-----
60	Kitchenware		Book/Small Box	-----
61	Kitchenware		Book/Small Box	-----
62	Kitchenware		Book/Small Box	-----
63	Kitchenware		Book/Small Box	-----
64	Kitchenware		Book/Small Box	-----
65	Kitchenware		Book/Small Box	-----
66	Kitchenware		Book/Small Box	-----
67	Kitchenware		Book/Small Box	-----
68	Table	part of	Wrapped	-----
69	Camping Equipment		Wrapped	-----
70	Photo Albums		Book/Small Box	-----
71	Photo Albums		Book/Small Box	-----
72	Photo Albums		Book/Small Box	-----
73	Table Office		Wrapped	-----
74	CD discs		Book/Small Box	-----
75	CD discs		Book/Small Box	-----
76	Decorations		Wrapped	-----

Owner Signature

  
 \_\_\_\_\_  
 \_\_\_\_\_

Company's Signature

  
 \_\_\_\_\_  
 \_\_\_\_\_




A. UNIVERS TRANSIT LTD.

BECAUSE WE CARE...

77	Decorations		Wrapped	-----
78	Mirror		Wrapped	-----
79	Decorations		Wrapped	-----
80	Glassware		Medium Box	-----
81	Lamp, Floor or Pole		Wrapped	-----
82	Mirror		Wrapped	-----
83	Picture		Standup Box	-----

**Total Number of Packages: 83**

Owner Signature

  
\_\_\_\_\_  
\_\_\_\_\_

Company's Signature

  
\_\_\_\_\_  
\_\_\_\_\_

## ISF Information

ISF Number SV8-18046666324	Reference Number 305658	ISF Type ISF-10
Importer		Consignee
Shipment Type 03 - Household Goods/Personal Effects		
		Time Accepted 8/24/19 2:51:37 PM

<b>Bills of Lading</b>		
Carrier:	Mode of Transportation: Vessel, Container	
Bill Type	Bill Number	Bill on File
Straight/Regular/Simple Bill	MEDU HA374196	Yes

<b>Selling Party</b>
LEVRAN SHALEV Street Number: 4 Street Name: HAZOHAR SHOHAM, IL

<b>Buying Party</b>
LEVRAN SHALEV Street Name: EAST GALBRAITH CINCINNATI, OH 45236, US

<b>Ship to Party</b>
LEVRAN SHALEV Street Name: EAST GALBRAITH CINCINNATI, OH 45236, US

<b>Container Stuffing Location</b>
A UNIVERS TRANSIT Street Number: 14 Street Name: HADARIM ASHDOD, IL

<b>Consolidator</b>
A UNIVERS TRANSIT Street Number: 14 Street Name: HADARIM ASHDOD, IL

<b>Manufacturer</b>		
LEVRAN SHALEV Street Number: 4 Street Name: HAZOHAR SHOHAM, IL		
Part Number	Tariff Number	Country of Origin
	980400	IL

<b>Consignee</b>
LEVRAN SHALEV A
DUNS/DUNS+4: 22606165



**POWER OF ATTORNEY - to clear my personal effects shipment through U.S. Customs**

Section 141.5, Title 19, United States Code of Federal Regulations requires a Customs House Broker to obtain a valid Power of Attorney before transacting business in the name of his principal (Importer of Records).

To expedite clearance of your shipment and to comply with U.S. Customs regulations, please complete the information as requested below (X).

KNOW ALL MEN BY THESE PRESENTS: That, (X) Shalev Avraham Levran  
(Full name of Shipper)

Residing at (X) 5406 East Gailbraith Rd. Cincinnati, Ohio, 45236  
(U.S. Address)

hereby constitutes and appoints the following Customs House Broker:

as a true and lawful agent and attorney of the grantor named above for and in the name, place, And stead of said grantor from this date and in all Customs Districts, and in no other name, to make, endorse, sign, declare, or swear to any entry, withdrawal, declaration, certificate, bill of lading, carnet or other document required by law or regulation in connection with the importation, transportation, or exportation of any merchandise shipped or consigned by or to said grantor; to perform any act or condition which may be required by law or regulation in connection with such merchandise; to receive any merchandise deliverable to said grantor;

To make endorsements on bills of lading conferring authority to transfer title, make entry or collect drawback, and to make, sign, declare, or swear to any statement, supplemental statement, schedule, supplemental schedule, certificate of delivery, certificate of manufacture, certificate of manufacture and delivery, abstract of manufacturing records, declaration of proprietor on drawback entry, declaration of exporter on drawback entry, or any other affidavit or document which may be required by law or regulation for drawback purposes, regardless of whether such bill of lading, sworn statement, schedule, certificate, abstract, declaration, or other affidavit or document is intended for filing in any customs district;

To sign, seal, and deliver for and as the act of said grantor any bond required by law or regulation in connection with the entry or withdrawal of imported merchandise or merchandise exported with or without benefit of drawback, or in connection with the entry, clearance, lading, unlading or navigation of any vessel or other means of conveyance owned or operated by said grantor, and any and all bonds which may be voluntarily given and accepted under applicable Laws and regulations, consignee's and owner's declarations provided for in section 485, Tariff Act of 1930, as amended or affidavits in connection with the entry of merchandise.

To sign and swear to any document and to perform any act that may be necessary or required by law or regulation in connection with the entering, clearing, lading, unlading, or operation of any vessel or other means of conveyance owned or operated by said grantor;

And generally to transact at the customshouses in any district, any and all customs business, including making, signing, and filing of protests under section 514 of the Tariff Act of 1930, in which said grantor is or may be concerned or interested and which may properly be transacted or performed by an agent and attorney, giving to said agent and attorney full power and authority to do anything whatever requisite and necessary to be done in the premises as fully as said grantor could do if present and acting, hereby ratifying and confirming all that the said agent and attorney shall lawfully do by virtue of these presents: the foregoing power of attorney to remain in full force and effect until the \_\_\_\_\_ day of \_\_\_\_\_, 2\_\_\_\_\_, or until notice of revocation in writing is duly given to and received by a District Director of Customs. If the donor of this power of attorney is a partnership, the said power shall in no case have any force or effect after the expiration of 2 years from the date of its execution.

IN WITNESS WHEREOF, the said (X) Shalev Avraham Levran  
(Full name of shipper)

has caused these presents to be signed (X) S.A.L DATE (X) Aug 25th, 2019  
(Signature of Shipper)

WITNESSED BY (X) \_\_\_\_\_ (X) \_\_\_\_\_  
(Witness name) Witness Signature

U.S. DEPARTMENT OF HOMELAND SECURITY  
Bureau of Customs and Border Protection

FORM APPROVED OMB NO. 1651-0014

**DECLARATION FOR FREE ENTRY  
OF UNACCOMPANIED ARTICLES**

19 CFR 148.6, 148.52, 148.53, 148.77

PAPERWORK REDUCTION ACT NOTICE: This request is in accordance with the Paperwork Reduction Act. We ask for the information in order to carry out the laws and regulations administered by the CBP. These regulations and forms apply to importers to ensure that they are complying with the law and to allow us to figure, collect, or refund the right amount of duty and tax. It is mandatory. The estimated average burden associated with this collection of information is 10 minutes per respondent depending on individual circumstances. Comments concerning the accuracy of this burden estimate and suggestions for reducing this burden should be directed to the Bureau of Customs and Border Protection, Information Services Branch, Washington, DC 20229, and to the Office of Management and Budget, Paperwork Reduction Project (1651-0014), Washington, DC 20503.

**PART I -- TO BE COMPLETED BY ALL PERSONS SEEKING FREE ENTRY OF ARTICLES** (Please consult with the CBP official for additional information or assistance. REMEMBER--All of your statements are subject to verification. False declarations or failure to declare articles could result in penalties.)

1. IMPORTER'S NAME (Last, first and middle) <input checked="" type="checkbox"/> Shalev Avraham Levran		2. IMPORTER'S DATE OF BIRTH <input checked="" type="checkbox"/> April 10th, 1976	3. IMPORTER'S DATE OF ARRIVAL <input checked="" type="checkbox"/> Jul 12th -2019
4. IMPORTER'S U.S. ADDRESS <input checked="" type="checkbox"/> 5406 East Gailbraith Rd., Cincinnati, Ohio, 45236		5. IMPORTER'S PORT OF ARRIVAL <input checked="" type="checkbox"/> Toronto, Canada	
6. NAME OF ARRIVING VESSEL CARRIER AND FLIGHT/TRAIN <input checked="" type="checkbox"/>			
7. NAME(S) OF ACCOMPANYING HOUSEHOLD MEMBERS (wife, husband, minor children, etc.) <input checked="" type="checkbox"/> Orit Levran, Talya Levran, Liri Levran, Eylon Levran			

8. THE ARTICLES FOR WHICH FREE ENTRY IS CLAIMED BELONG TO ME AND/OR MY FAMILY AND WERE IMPORTED	A. DATE	B. NAME OF VESSEL/CARRIER	C. FROM (Country)	D. B/L OR AWB OR I.T. NO.
E. NUMBER AND KINDS OF CONTAINERS	F. MARKS AND NUMBERS			

**PART II -- TO BE COMPLETED BY ALL PERSONS EXCEPT U.S. PERSONNEL AND EVACUEES**

9. RESIDENCY ("X" appropriate box)  
I declare that my place of residence abroad  is  was

A. NAME OF COUNTRY	B. LENGTH OF TIME
	Yr. Mo.

C. RESIDENCY STATUS UPON MY/OUR ARRIVAL ("X" One)  
 (1) Returning resident of the U.S.  (2) Nonresident:  a. Emigrating to the U.S.  b. Visiting the U.S.

10. STATEMENT(S) OF ELIGIBILITY FOR FREE ENTRY OF ARTICLES  
I the undersigned further declare that ("X" all applicable items and submit packing list):

<p><b>A. Applicable to RESIDENT AND NONRESIDENT</b></p> <input type="checkbox"/> (1) All household effects acquired abroad for which free entry is sought were used abroad for at least one year by me or my family in a household of which I or my family was a resident member during such period of use, and are not intended for any other person or for sale. (9804.00.05, HTSUSA) <input type="checkbox"/> (2) All instruments, implements, or tools of trade, occupation or employment, and all professional books for which free entry is sought were taken abroad by me or for my account or I am an emigrant who owned and used them abroad. (9804.00.10, 9804.00.15, HTSUSA) <p><b>B. Applicable to RESIDENT ONLY</b></p> <input type="checkbox"/> All personal effects for which free entry is sought were taken abroad by me or for my account. (9804.00.45, HTSUSA)	<p><b>C. Applicable to NONRESIDENT ONLY</b></p> <input type="checkbox"/> (1) All articles of apparel, personal adornment, toiletries and similar personal effects for which free entry is sought were actually owned by me and in the possession of myself, or those members of my family who accompanied me, at the time of departure to the United States and that they are appropriate and are intended for our personal use and not for any other person nor for sale. (9804.00.20 HTSUSA) <input type="checkbox"/> (2) Any vehicles, trailers, bicycles or other means of conveyance being imported are for the transport of me and my family and such incidental carriage of articles as are appropriate to my personal use of the conveyance. (9804.00.35, HTSUSA)
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**PART III -- TO BE COMPLETED BY U.S. PERSONNEL AND EVACUEES ONLY**

I, the undersigned, the owner, importer, or agent of the importer of the personal and household effects for which free entry is claimed, hereby certify that they were in direct personal possession of the importer, or of a member of the importer's family residing with the importer, while abroad, and that they were imported into the United States because of the termination of assignment to extended duty (as defined in section 148.74(d) of the Customs Regulations) at a post or station outside the United States and the CBP Territory of the United States, or because of Government orders or instructions evacuating the importer to the United States; and that they are not imported for sale or for the account of any other person and that they do not include any alcoholic beverages or cigars. Free entry for these effects is claimed under Subheading No. 9805.00.50, Harmonized Tariff Schedule of the United States.

1. DATE OF IMPORTER'S LAST DEPARTURE FROM THE U.S.	2. A COPY OF THE IMPORTER'S TRAVEL ORDERS IS ATTACHED AND THE ORDERS WERE ISSUED ON:
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**PART IV -- TO BE COMPLETED BY ALL PERSONS SEEKING FREE ENTRY OF ARTICLES** (Certain articles may be subject to duty and/or other requirements and must be specifically declared herein. Please check all applicable items and list them separately in item D on the reverse.)

<p><b>A. For U.S. Personnel, Evacuees, Residents and Non-Residents</b></p> <input type="checkbox"/> (1) Articles for the account of other persons. <input type="checkbox"/> (2) Articles for sale or commercial use.	<p><b>B. For Residents and Non-Residents ONLY</b></p> <input type="checkbox"/> (7) Foreign household effects acquired abroad and used less than one year. <input type="checkbox"/> (8) Foreign household effects acquired abroad and used more than one year.
<input type="checkbox"/> (3) Firearms and/or ammunition. <input type="checkbox"/> (4) Alcoholic articles of all types or tobacco products.	<p><b>C. For Resident ONLY</b></p> <input type="checkbox"/> (9) Personal effects acquired abroad.
<input type="checkbox"/> (5) Fruits, plants, seeds, meats, or birds. <input type="checkbox"/> (6) Fish, wildlife, animal products thereof.	<input type="checkbox"/> (10) Foreign made articles acquired in the United States and taken abroad on this trip or acquired abroad on another trip that was previously declared to CBP.
	<input type="checkbox"/> (11) Articles taken abroad for which alterations or repairs were performed abroad.

TREASURY DEPARTMENT  
U.S. CUSTOMS SERVICE  
SUPPLEMENTAL DECLARATION FOR  
UNACCOMPANIED PERSONAL AND HOUSEHOLD EFFECTS

1. Owner of Household Goods  (Last, first and middle) Orit Levran

2. Date of Birth  March 24th, 1978 3. Citizenship  Israeli

4. Passport (Country and Number)  Israel - Passport ID#: 22498810

5. Social Security No. 143692037 6. Resident Alien No. \_\_\_\_\_

7. U.S. Address  5406 East Gailbraith Rd. Cincinnati, Ohio, 45236 10. Employer  Siemens

11. Position with Company  UX Manager

8. Foreign Address  \_\_\_\_\_

12. Length of Employment  5 years and 2 months

13. Nature of Business  SW development

9. Reason for Moving  New job assignment

14. Name and Telephone of Company Official Who Can Verify Above Information   
Siemens, phone number: +1 (503) 685 4824


15. Name and Address of Freight Forwarders  
Packers and Shipping Agents \_\_\_\_\_

16. Shipment Itinerary  
(specify place of loading and intermediate ports)

17. Certification  
I, the undersigned, certify that this declaration is correct and complete

A. Authorized Agent (from facts obtained from the importer)

B. Importer

Signature   Date  Aug 25th, 2019

**D. LIST OF ARTICLES**

(1) ITEM NUMBER CHECKED IN PART IV, A., B., C.	(2) DESCRIPTION OF MERCHANDISE	(3) VALUE OR COST OF REPAIRS	(4) FOREIGN MERCHANDISE TAKEN ABROAD THIS TRIP: State where in the U.S. the foreign merchandise was acquired or when and where it was previously declared to CBP.
	As Per attached Packing List		

**PART V -- CARRIER'S CERTIFICATE AND RELEASE ORDER**

The undersigned carrier, to whom of upon whose order the articles described in PART I, 8., must be released, hereby certifies that the person named in Part I, 1., is the owner or consignee of such articles within the purview of section 484(h), Tariff Act of 1930.

In accordance with the provisions of section 484(h), Tariff Act of 1930, authority is hereby given to release the articles to such consignee.

1. NAME OF CARRIER	2. SIGNATURE OF AGENT (Print and sign) <span style="float: right;">Date</span>
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**PART VI -- CERTIFICATION TO BE COMPLETED BY ALL PERSONS SEEKING FREE ENTRY**

I, the undersigned, certify that this declaration is correct and complete.

1. "X" One

A. Authorized Agent\* (From facts obtained from the importer)       B. Importer *X* Shalev Avraham Levrant      Orit Levrant

2. SIGNATURE <i>X</i> <i>S.A.L.</i> <i>Orit</i>	3. DATE <i>X</i> Aug 25th, 2019
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\*An Authorized Agent is defined as a person who has actual knowledge of the facts and who is specifically empowered under a power of attorney to execute this declaration (see 19 CFR 141.19, 141.32, 141.33).

<b>PART VII -- CBP USE ONLY</b> (Inspected and Released)	1. SIGNATURE OF CBP OFFICIAL	2. DATE
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