Shipper's Name and Address								5 1 M S 1 M S M S M S M 1 M			
Shipper's Name and Address DIANA SHEMTOV		Shipper's Ac	count Number		Not Negotiable LUFTHANSA CARGO AG Air Waybill LANGER KORNWEG 34						
KALMAN MAGEN 5					Issued by LANGER KORNWEG 34						
TEL AVIV				ISSU	D-65441 KELSTERBACH						
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					-	in a 1 2	1 0 -F4-1- A1-	144 1 71		www.	
Consign	ee's Name and Address		Consignee's Ac	count Number	1000000	70.00	- 1		e originals and have the same va		
DAVID	SOLOMON		20,10,9,100,0,10	odani mambor	lt is	It is agreed that the goods described herein are accepted in apparent good order and condition (except as noted) for carriage SUBJECT TO THE CONDITIONS OF CONTRACT ON THE REVERSE					
13487	RUE HUNTINGTON				HER	HEREOF, ALL GOODS MAY BE CARRIED BY ANY OTHER MEANS INCLUDING ROAD OR ANY					
PIERRE	FONDS, ROXBORO				SHIF	OTHER CARRIER UNLESS SPECIFIC CONTRARY INSTRUCTIONS ARE GIVEN HEREON BY THE SHIPPER, AND SHIPPER AGREES THAT THE SHIPPERT MAY BE CARRIED VIA INTERMEDIATE					
QUEBEC	: H8Z 1G3				510	STOPPING PLACES WHICH THE CARRIER DEEMS APPROPRIATE. THE SHIPPER'S ATTENTION IS					
CANADA	L				DRAWN TO THE NOTICE CONCERNING CARRIER'S LIMITATION OF LIABILITY. Shipper may increase such limitation of liability by declaring a higher value for carriage and paying a supplemental						
					cha	charge if required					
Issuing (Carrier's Agent Name and	d City			Accounting Information						
F.C.	(FLYING CARGO	INI (C	L TRANSPOR	TATION LTD	INVOICE NO: DAVID SOLOMON.						
	BLDG. SUITE				120 121						
			100	MARTON TERM	REF:DAVID SOLOMON.						
F.C.	(FLYING CARGO	O) INT	L TRANSPOR	TATION LTC	**CIP 2000**						
Agent's IA			Account No		1						
3747	117										
Airport of	Departure (Addr. of First	(Carrier) an	d Requested Routing		-						
TEL-			a requoted reducing								
_	B. First C Box	iting and Destination	. / - -	v Total				-			
То	Dy mor Camer	iting and Destinati	10 15	2 No. 12.				Other PD COLL	Declared Value for Carriage	Dedared Value for Customs	
FRA	LUFTHANSA		MUC I	H YUL LH	US	D	X Z	X	NVD	NVD	
	Airport of Destination		Flight	Date	A	mount of li	nsurance	INSURAN	ICE - If Carrier offers insurance, and su	uch insurance is requested in	
MONT:	REAL		LH8341/30.11.19	LH7161/01.12.19		ΝI	L	In box ma	e with the conditions thereof, indicate inked 'Amount of Insurance'	amount to be insured in figures	
Handling	Information							The second	1		
				TIFY:GO TRANSI							
			585	7 CHEMIN ST	RANC	RANCOIS SAINT LAURENT					
			oc	H4S 1B4 TEL:5	514 5	212 200	2.4			SCI	
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No. of Pieces	Gross Kg F	Rate Class	Chargeab	le Rate /					Nature and	Overally of Condo	
RCP	Weight lb	Commodity Item No			arge		Total			Quantity of Goods nsions or Volume)	
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1	2 330.UK		434.00	5.50		2	387.0	0	2 SLAC		
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									100X113X145(1) 1	18X102X80(1) CM	
			11								
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2	356.0						2387	00	VOL : 433.5 M^3 :	2 (0	
\ Dr	epaid / Weight	t Charge	// 0-11				2307	.00	VOL . 433.5 M 3 :	2.60	
	epard / vveigiti	Charge	/\ Collect /	Other Charges							
	2,387.00										
	\ Valuation	Charge									
	\ Ta	ax /		-							
	Total Other Ch	orace Due (A = = = /								
Total Other Charges Due Agent Sh			Shipper certifies that the particulars on the face hereof are correct and that insofar as any part of the								
COI			consignment contains dangerous goods, such part is properly described by name and is proper condition for carriage by air according to the applicable Dangerous Goods Regulations.								
Total Other Charges Due Carrier for carriage					all according to the applicable Dangerous Goods Regulations.						
	X										
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	ı										
\	Test December /		_ we say a				Signat	ure of Shi	pper or his Agent		
Total Prepaid Total Collect		Total Collect							TRANSPORT. LTD		
2,387.00				A company of DHL CO.							
Currency Conversion Rates CC Charges in Dest. Currency] 21 11 -	_					FOR CARRIER:		
-				21.11.19 TEL-AVIV LUFTHANSA							
For	Carrier's Use only	Cham	ges at Destination /	Executed on (date)	06		At (pla	ice)	Signature	of Issue Carrier or its Agent	
	at Destination	Gialy	de de Destination	Total Collect	onarge	5	005	04 44			
							205	2141	020-22408	3234 Ver:2	

020 TLV 22408234

Agence des douanes et du revenu du Canada

PROTECTED (when completed)

PERSONAL EFFECTS ACCOUNTING DOCUMENT

Accounting Document No. (Settler, Former Resident, Seasonal Resident, or Beneficiary) Shaded areas for customs use only Importer's Name Cargo Control No. Customs Stamp DAVID SOLOMON Country of Origin Country of Export Importer's Address **ISRAEL** ISRAEL 13487 RUE HUNTINGTON PIERRE FONDS -Landed Immigrant / Permanent Resident ROXBORO Port of Entry OUEBEC H8Z 1G3 Date of Landing IMM 1000 No Item Description of Goods (include serial numbers, if applicable) Value (CDN Dollars) 1 PERSONAL WARDROBE - SHIRTS, SHOES, PANTS, ETC 6000 2 PERSONAL BOOKS 2000 3 VACUUM CLEANER 150 4 PICTURE FRAME 300 5 STEAM IRON 150 6 BEDDING AND TOILETTRIES (SHEETS, TOWELS, BLANKETS 1000 7 SPEAKERS 150 PRINTER 8 250 All conveyances MUST be eligible for importation in accordance with Transport Canada requirements. Vehicle import registration fees may also apply. Conveyances (make, model, serial number of vehicle, vessel, aircraft, or trailer) Value (CDN Dollars) K22 / Vehicle Import Form No. 1 2 3 x Mover's Inventory Form B15 No. (if applicable) Additional List of Goods Form B4A 1 Other Goods to Follow * Yes No CLASSIFICATION TYPE - See information on reverse X FORMER RESIDENT (tariff item No. 9805.00.00) BENEFICIARY (tariff item No. 9806.00.00) I hereby declare that I have read and qualify for the provisions of tariff item No. 9805.00.00 and that: I hereby declare that I have read and qualify for the provisions of tariff item No. 9806.00.00 and that I am a beneficiary of personal and household effects which were bequeathed to me without remuneration as 1. \[\] I have been a resident of another country for at least one year; or 1. The result of the death of_ 2. X I have been continuously absent from Canada for at least one year; and a resident of _ Heft Canada on 27 DECEMBER 2011; and 3. who died on -4. I returned to Canada to resume residence on _____19 OCTOBER 2019 ☐ In anticipation of the death of— With the exception of wedding gifts, bride's trousseau, alcoholic beverages and tobacco products or replacement goods described in the *Tariff Item No. 9805.00.00 Exemption Order*, all household and personal effects imported or to be imported by me under this tariff item have been actually owned, possessed, and used abroad by me for at least six months prior to the date of my return to Canada to resume residence. 5 who resides in -I have attached: 1. \square A copy of the will, showing that I am a beneficiary of the estate; All goods imported are my personal or household effects and were not used abroad for any commercial purpose nor will they be used in Canada for any commercial purpose. 6. A signed statement from the donor outlining the circumstances of the gift; or 3. A statement from the executor of the estate or other legal reprresentative of the donor outlining the circumstances of the gift. If any item is sold or otherwise disposed of in Canada within 12 months of the date of its importation, I will notify a customs office of such fact and pay all duties owing at the time. 7. SEASONAL RESIDENT (tariff item No. 9829.00.00) SETTLER (tariff item No. 9807.00.00) I hereby declare that I have read and qualify for the provisions of tariff item No. 9829.00.00 and that: I hereby declare that I have read and qualify for the provisions of tariff item No. 9807.00.00 and that: 1. I arrived in Canada to occupy my seasonal residence for the first time I am entering Canada with the intention of establishing, for the first time, a permanent residence for a period in excess of 12 months and I arrived in All goods imported or to be imported by me under this tariff item have been in my ownership, possession, and use prior to my first arrival in Canada to occupy my seasonal residence. With the exception of wedding gifts, bride's trousseau, alcoholic beverages and tobacco products described in the *Tariff Item No. 9807.00.00 Exemption Order*, all household and personal effects imported or to be imported by me under this tariff Item have actually been owned, possessed, and used abroad by me prior to the date of my arrival in Canada. All goods imported are my personal or household property and they will not be used in Canada for any commercial purpose. If any item is sold or otherwise disposed of in Canada within 12 months of the date of its importation, I will notify a customs office of such fact and pay all duties owing at the time. All goods imported are my personal or household property and they will not be used in Canada for any commercial purpose. If any item is sold or otherwise disposed of in Canada within 12 months of the date of its importation, I will notify a customs office of such fact and pay all duties owing at the time. 5. I have not previously claimed the benefits of tariff item No. 9829.00.00. 51.6 QUEBEC, CANADA 28 OCTOBER 2019

> Signature of Importer Canada

(Co formulaise aulate aveni on feananie)

Signed at





CANADA



Issuing Country/Pays émetteur Type/Type CAN Sumame/Nom

SOLOMON

Given names/Prénoms

DAVID ISAAC

Nationality/Nationalité

CANADIAN/CANADIENNE

Date of birth/Date de naissance

03 JULY/JUIL 76

Place of birth/Lieu de naissance Sex/Sexe

BRAMPTON CAN

Date of issue/Date de délivrance.

13 AUG / AOUT 18

Date of expiry/Date d'expiration

13 AUG /AOUT 20

Issuing Authority/Autorité de délivrance

SAINT-LAURENT

Passport No./N° de passeport AD839473

O

P<CANSOLOMON<<DAVID<ISAAC<<<<<<< AD839473<7CAN7607039M2008136<<<<<<<<

THE PROPERTY OF THE PROPERTY O



Shipper Name:

David Solomon

Packing Job Date:

20 Nov 2019

Origin Address:

Israel

Destination Address:

Canada

PACKING INVENTORY

No.	Description	Comment	Box Type	Room
1	Office Supplies		Medium Box	Ī
2	Clothes		Medium Box	<u> </u>
3	Clothes		Medium Box	
4	Books		Book/Small Box	
5	Clothes		Medium Box	Ī
6	Books		Book/Small Box	
7	Books		Book/Small Box	ļ
8	Speaker		Wrapped	Ī
9	Printer		Wrapped	İ
10	Shoes		Medium Box	
11	Clothes		Medium Box	ĺ
12	Clothes		Medium Box	Ì
13	Clothes		Medium Box	İ
14	Clothes		Medium Box	i
15	Picture		Standup Box	Ī
16	Books		Book/Small Box	
17	Table	masaj	Wrapped	
18	Books		Book/Small Box	-
19	Linen		Medium Box	Ī

Owner Signature	<i>**</i>	Company's Signature	
Page 1 of 2 •			