



DRAFT - NON NEGOTIABLE

SEA WAYBILL

SHIPPER/EXPORTER A. UNIVERSE TRANSIT LTD. INTERNATIONAL MOVERS P.O.BOX 4052 ASHDOD 77140 TEL: 08-8563145		BOOKING NO. HFAA02093600	SEA WAYBILL NO. ONEYHFAA02093600
CONSIGNEE SCHUMACHER CARGO LOGISTICS, INC. 550 WEST 135TH STREET GARDENA, CA 90248 U.S.A.		EXPORT REFERENCES(for the Merchant's and/or Carrier's reference only. See back clause 8. (4).)	
NOTIFY PARTY (It is agreed that no responsibility shall be attached to the Carrier or its Agents for failure to notify) SCHUMACHER CARGO LOGISTICS, INC. 550 WEST 135TH STREET GARDENA, CA 90248 U.S.A.		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", to be carried 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, as applicable. Delivery of the Goods to the Carrier for Carriage hereunder constitutes acceptance by the Merchant (as defined hereinafter) (i) of 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 tariffs(s) as if they were all signed by the Merchant, and (ii) that any prior representations and/or agreements for or in connection with Carriage of the Goods are superseded by this Bill of Lading. 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 any outstanding Freight) in exchange for the Goods or a Delivery Order or the pin codes for any applicable Electronic Release System. If this is a non-negotiable (straight) Bill of Lading, or where issued as a Sea Waybill, the Carrier shall deliver the Goods or issue a Delivery Order or the pin codes for any applicable Electronic Release System (after payment of outstanding Freight) to the named consignee against the surrender of one original Bill of Lading, or in the case of a Sea Waybill, on production of such reasonable proof of identity as may be required by the Carrier, or in accordance with the national law at the Port of Discharge or Place of Delivery as 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 whenever one original Bill of Lading has been surrendered all other Bills of Lading shall be void.	
PRE-CARRIAGE BY YM EXPRESS 052W	PLACE OF RECEIPT ASHDOD	FINAL DESTINATION(for the Merchant's reference only)	
OCEAN VESSEL VOYAGE NO. FLAG YM EXPRESS 052W	PORT OF LOADING HAIFA	TYPE OF MOVEMENT(IF MIXED, USE DESCRIPTION OF PACKAGES AND GOODS FIELD) FCL / FCL CY / CY	
PORT OF DISCHARGE NEW YORK, NY	PLACE OF DELIVERY NEW YORK, NY		

CNTR. NOS. W/SEAL NOS. MARKS & NUMBERS		QUANTITY (FOR CUSTOMS DECLARATION ONLY)	H M	DESCRIPTION OF GOODS	GROSS WEIGHT	GROSS MEASUREMENT
TEMU5127349 / 290445		7		7 PACKAGES / FCL / FCL/20GP	2571.000KGS/24	0.90M3
N/M		2 PACKAGES		2 PKGS USED HOUSEHOLD GOODS EXPRESS WAYBILL	1070.000KGS	6.820CBM
N/M		3 PACKAGES		3 PKGS USED HOUSEHOLD GOODS EXPRESS WAYBILL	1064.000KGS	12.790CBM

** TO BE CONTINUED ON ATTACHED LIST **

Declared Cargo Value US \$ _____ . If Merchant enters a value, Carrier's limitation of liability shall not apply and the ad valorem rate will be charged.

FREIGHT & CHARGES PAYABLE AT / BY:			SERVICE CONTRACT NO. HFA20T0012	DOC FORM NO.	COMMODITY CODE	EXCHANGE RATE	(1) ORIGINAL BILLS(S) HAVE BEEN SIGNED. DATE CARGO RECEIVED DATE LADEN ON BOARD PLACE OF BILL(S) ISSUE HAIFA DATED
CODE	TARIFF ITEM	FREIGHTED AS	RATE	PREPAID	COLLECT		
The printed terms and conditions on this Bill are available at its website at www.one-line.com							SIGNED BY: CROWN SHIPPING LTD. AS AGENT ONLY OF ONE - OCEAN NETWORK EXPRESS , as agent for and on behalf of

Ocean Network Express Pte. Ltd.
(ONE), AS CARRIER

DRAFT - NON NEGOTIABLE

VESSEL VOYAGE: YM EXPRESS 052W

B/L NO.: ONEYHFAA02093600

CNTR NOS. W/SEAL NOS. MARKS & NUMBERS	QUANTITY (FOR CUSTOMS DECLARATION ONLY)	H M	DESCRIPTION OF GOODS	GROSS WEIGHT	MEASUREMENT
N/M	2 PACKAGES		2 PKGS USED HOUSEHOLD GOODS EXPRESS WAYBILL	437.000KGS	4.480CBM
----- OCEAN FREIGHT PREPAID					

SIGNED BY: CROWN SHIPPING LTD. AS AGENT ONLY OF ONE -
OCEAN NETWORK EXPRESS

, as agent for and on behalf of

Ocean Network Express Pte. Ltd.
(ONE), AS CARRIER



S. R. Cohen

SIGNATURE OF BEARER / SIGNATURE DU TITULAIRE / FIRMA DEL TITULAR

PASSPORT
PASSEPORT
PASAPORTE

UNITED STATES OF AMERICA

Type / Type / Tipo: P Issuing Country / Country / País de emisión: USA Passport No. / No. du passeport / No. de pasaporte: 529272384



Surname / Nom / Apellido: COHEN

Given Names / Prénoms / Nombres: SABINA RUTH

Nationality / Nationalité / Nacionalidad: UNITED STATES OF AMERICA

Date of birth / Date de naissance / Fecha de nacimiento: 04 Jul 1940

Place of birth / Lieu de naissance / Lugar de nacimiento: ARGENTINA Sex / Sexe / Sexo: F

Date of issue / Date de délivrance / Fecha de expedición: 26 May 2015 Authority / Autorité / Autoridad: United States

Office of issue / Lieu d'émission / Oficina de expedición: Department of State

25 May 2025

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

OMB APPROVAL NO. 1651-0014
EXPIRES: 11-30-2022
ESTIMATED BURDEN: 45 MIN.

DECLARATION FOR FREE ENTRY OF UNACCOMPANIED ARTICLES

19 CFR 148.6, 148.52, 148.53, 148.77

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 1651-0014. The estimated average time to complete this application is 45 minutes. The obligation to respond to this information collection is mandatory to obtain benefits. If you have any comments regarding the burden estimate you can write to CBP PRA Officer, U.S. Customs and Border Protection, Office of Regulations and Rulings, 10th floor, 90K Street NE, Washington DC 20229-1177.

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 initial) COHEN SABINA R.		2. IMPORTER'S DATE OF BIRTH July-4-1960	3. IMPORTER'S DATE OF ARRIVAL
4. IMPORTER'S U.S. ADDRESS 76 Clove Rd. apt 2 Brooklyn NY 11225		5. IMPORTER'S PORT OF ARRIVAL NYC	
6. NAME OF ARRIVING VESSEL CARRIER AND FLIGHT/TRAIN			
7. NAME(S) OF ACCOMPANYING HOUSEHOLD MEMBERS (wife, husband, minor children, etc.)			

8. THE ARTICLES FOR WHICH FREE ENTRY IS CLAIMED BELONG TO ME AND/OR MY FAMILY AND WERE IMPORTED	A. DATE 8-31-2024	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 <input checked="" type="checkbox"/> is <input type="checkbox"/> was	A. NAME OF COUNTRY U.S.A	B. LENGTH OF TIME 3 Yr. Mo.
C. RESIDENCY STATUS UPON MY/OUR ARRIVAL ("X" One) <input type="checkbox"/> (1) Returning resident of the U.S. <input type="checkbox"/> (2) Nonresident: <input type="checkbox"/> a. Emigrating to the U.S. <input type="checkbox"/> 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>A. Applicable to RESIDENT and NONRESIDENT</p> <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)</p> <p><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> <p>B. Applicable to RESIDENT ONLY</p> <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>	<p>C. Applicable to NONRESIDENT ONLY</p> <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)</p> <p><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)</p>
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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>A. For U.S. Personnel, Evacuees, Residents and Non-Residents</p> <p><input type="checkbox"/> (1) Articles for the account of other person.</p> <p><input type="checkbox"/> (3) Firearms and/or ammunition.</p> <p><input type="checkbox"/> (5) Fruits, plants, seeds, meats, or birds.</p>	<p><input type="checkbox"/> (2) Articles for sale or commercial use.</p> <p><input type="checkbox"/> (4) Alcoholic articles of all types or tobacco products.</p> <p><input type="checkbox"/> (6) Fish, wildlife, animal products thereof.</p>	<p>B. For Residents and Non-Residents ONLY</p> <p><input type="checkbox"/> (7) Foreign household effects acquired abroad and used less than one year.</p> <p><input type="checkbox"/> (8) Foreign household effects acquired abroad and used more than one year.</p>	<p>C. For Resident ONLY</p> <p><input type="checkbox"/> (9) Personal effects acquired abroad.</p> <p><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</p> <p><input type="checkbox"/> (11) Articles taken abroad for which alterations or repairs were performed abroad.</p>
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TREASURY DEPARTMENT
U.S. CUSTOMS SERVICE
SUPPLEMENTAL DECLARATION FOR
UNACCOMPANIED PERSONAL AND HOUSEHOLD EFFECTS

1. Owner of Household Goods
(Last, first and middle) COHEN SABINA R.

2. Date of Birth July-4-1960 | 3. Citizenship _____

4. Passport (Country and Number) USA 529272384

5. Social Security No. XXXVXV 8134 | 6. Resident Alien No. _____

7. U.S. Address 76 clove rd. apt 2 | 10. Employer _____
Brooklyn NY 11225

8. Foreign Address _____ | 11. Position with Company _____

9. Reason for Moving _____ | 12. Length of Employment _____

13. Nature of Business _____

14. Name and Telephone of Company Official Who Can Verify
Above Information _____

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: S. R. Cohen Date 8-31-2020

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) SABINA RUTH COHEN
(Full name of Shipper)

Residing at (X) 76 Clove Rd. apt 2 Brooklyn NY 11225
(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, unloading 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, unloading, 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) Sabina R. Cohen
(Full name of shipper)

has caused these presents to be signed (X) S.R. Cohen DATE (X) 8-31-2020
(Signature of Shipper)

WITNESSED BY (X) _____ (X) _____
(Witness name) (Witness Signature)

403493



A. UNIVERS TRANSIT LTD.

PROUDLY PRINTED IN ISRAEL

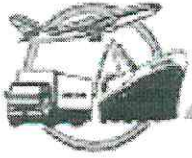
Shipper Name: Ruth Cohen
 Packing Job Date: 29 Jun 2017
 Origin Address: Israel
 Destination Address: USA

PACKING INVENTORY

No.	Description	Comment	Box Type	Room
1	Clothes		Medium Box	-----
2	Clothes		Medium Box	-----
3	Books		Book/Small Box	-----
4	Glassware		Medium Box	-----
5	Shoes		Medium Box	-----
6	Clothes		Medium Box	-----
7	Clothes		Medium Box	-----
8	Books		Book/Small Box	-----
9	Books		Book/Small Box	-----
10	Office Supplies		Medium Box	-----
11	Clothes		Medium Box	-----
12	Clothes		Medium Box	-----
13	Picture		Standup Box	-----
14	Picture		Standup Box	-----
15	Picture		Standup Box	-----
16	Picture		Standup Box	-----
17	Picture		Standup Box	-----
18	Picture		Standup Box	-----
19	Clothes		Medium Box	-----
20	Clothes		Medium Box	-----
21	Clothes		Medium Box	-----
22	Bench		Wrapped	-----
23	Mirror		Wrapped	-----
24	Books		Book/Small Box	-----
25	Books		Book/Small Box	-----

Owner Signature _____

Company's Signature _____



A. UNIVERS TRANSIT LTD.

PROUDLY PRINTED IN INDIA

26	Books		Book/Small Box	-----
27	Books		Book/Small Box	-----
28	Books		Book/Small Box	-----
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	Books		Book/Small Box	-----
37	Books		Book/Small Box	-----
38	Books		Book/Small Box	-----
39	Books		Book/Small Box	-----
40	Books		Book/Small Box	-----
41	Books		Book/Small Box	-----
42	Books		Book/Small Box	-----
43	Books		Book/Small Box	-----
44	Books		Book/Small Box	-----
45	Books		Book/Small Box	-----
46	Books		Book/Small Box	-----
47	Books		Book/Small Box	-----

Owner Signature _____

Company's Signature _____




A. UNIVERS TRANSIT LTD.

EXCELLENCE WE GET IT...

48	Books		Book/Small Box	-----
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Total Number of Packages: 48

Owner Signature 

Company's Signature 

ISF Information

ISF Number SV8-73434167775	Reference Number 306035	ISF Type ISF-10
Importer		Consignee
Shipment Type 03 - Household Goods/Personal Effects		
		Time Accepted 9/8/20 11:34:30 AM

Bills of Lading

Carrier:	Mode of Transportation: Vessel, Container	Master Bill: ONEY HFAA02093600
Bill Type	Bill Number	Bill on File
House Bill	ONEY HFAA02093A01	Yes

Selling Party

SABINA COHEN
 Street Number: 1
 Street Name: MISHMAR HAYARDEN
 RAMAT GAN, IL

Buying Party

SABINA COHEN
 Street Number: 76
 Street Name: CLOBE ROAD
 BROOKLYN 11225, US

Ship to Party

SABINA COHEN
 Street Number: 76
 Street Name: CLOBE ROAD
 BROOKLYN 11225, US

Container Stuffing Location

A UNIVERS TRANSIT
 Street Number: 14
 Street Name: HADARIM
 ASHDOD, IL

Consolidator

A UNIVERS TRANSIT
 Street Number: 14
 Street Name: HADARIM
 ASHDOD, IL

Manufacturer

SABINA COHEN
 Street Number: 1
 Street Name: MISHMAR HAYARDEN
 RAMAT GAN, IL

Part Number	Tariff Number	Country of Origin
	980400	IL

Consignee

COHEN SABINA R DUNS/DUNS+4: 529272384