



COPY NON NEGOTIABLE

PAGE: 1 OF
SEA WAYBILL

SHIPPER/EXPORTER BASSUK RAQUEL TAMAR ELIAHU SHEMA 15 JERUSALEM		BOOKING NO. HFAB00997400	SEA WAYBILL NO. ONEYHFAB00997400
CONSIGNEE BASSUK RAQUEL TAMAR 1720 MAPLE AVE APT. 950 EVANSTON, IL 60201		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) NOBEL VAN LINES INC NOBEL RELOCATIONS 17901 NW MIAMI COURT MIAMI GARDENS, FL 33169,33162 TEL:3056202002 IMPORT@NOBELRELO.COM		FORWARDING AGENT-REFERENCES FMC NO.	
PRE-CARRIAGE BY	PLACE OF RECEIPT HAIFA	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 tariff(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Merchant and (ii) that any prior representations and/or agreements for or in connection with Carriage of the Goods as superseded by this Bill of Lading.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) exchange for the Goods or 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 identify 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. I, WITNESS WHEREOF the Carrier or their Agent has signed the number of Bills of Lading stated at the top of all of this tenor and date, and whenever one original Bill of Lading has been surrendered all other Bills of Lading shall be void.	
OCEAN VESSEL VOYAGE NO. FLAG BERLIN BRIDGE 107W	PORT OF LOADING HAIFA		
PORT OF DISCHARGE NEW YORK, NY	PLACE OF DELIVERY CHICAGO RAIL RAMP		
		FINAL DESTINATION(for the Merchant's reference only)	
		TYPE OF MOVEMENT(IF MIXED, USE DESCRIPTION OF PACKAGES AND GOODS FIELD) FCL / FCL CY / CY	

PARTICULARS DECLARED BY SHIPPER BUT NOT ACKNOWLEDGED BY THE CARRIER					
CNTR. NOS. W/SEAL NOS. MARKS & NUMBERS	QUANTITY (FOR CUSTOMS DECLARATION ONLY)	H M	DESCRIPTION OF GOODS	GROSS WEIGHT	GROSS MEASUREMENT
MOAU0643480 / 158000	116		116 PACKAGES /FCL / FCL/20GP	2500.000KGS/25	1.000M3
N/M	116 PACKAGES		116 PGKS USED HOUSEHOLD GOODS EXPRESS WAYBILL *PASSPORT#642847046 USA	2500.000KGS	25.000CB
OCEAN FREIGHT PREPAID					

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: HAIFA		SERVICE CONTRACT NO. HFA21T0022	DOC FORM NO.	COMMODITY CODE	EXCHANGE RATE	[0] ORIGINAL BILLS(S) HAVE BEEN SIGNED.
CODE	TARIFF ITEM	FREIGHTED AS	RATE	PREPAID	COLLECT	
<p>The printed terms and conditions on this Bill are available at its website at www.one-line.com</p>						DATE CARGO RECEIVED DATE LADEN ON BOARD 02 MAY 2021 PLACE OF BILL(S) ISSUE HAIFA DATED 02 MAY 2021
						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

ISF Information

ISF Number SV8-75133314287	Reference Number 306250	ISF Type ISF-10
Importer		Consignee
Shipment Type 03 - Household Goods/Personal Effects		
		Time Accepted 5/9/21 11:01:35 AM

Bills of Lading

Carrier:	Mode of Transportation: Vessel, Container	
Bill Type	Bill Number	Bill on File
Straight/Regular/Simple Bill	ONEY HFAB00997400	Yes

Selling Party

BASSUK RAQUEL
 Street Number: 15
 Street Name: ELIAHU SHEMA
 JERUSALEM, IL

Buying Party

BASSUK RAQUEL
 Street Number: 1720
 Street Name: MAPLE AVE
 EVANSTON, IL 60201, US

Ship to Party

BASSUK RAQUEL
 Street Number: 1720
 Street Name: MAPLE AVE
 EVANSTON, IL 60201, 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

BASSUK RAQUEL
 Street Number: 15
 Street Name: ELIAHU SHEMA
 JERUSALEM, IL

Part Number	Tariff Number	Country of Origin
	980400	IL

Consignee

BASSUK RAQUEL T	DUNS/DUNS+4: 642847046
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A. UNIVERS TRANSIT LTD.


BECAUSE WE CARE...

Shipper Name: Raquel Bassuk
Packing Job Date: 07 Apr 2021
Origin Address: Israel
Destination Address: USA


PACKING INVENTORY

No.	Description	Comment	Box Type	Room
1	Kitchenware		Book/Small Box	-----
2	Kitchenware		Book/Small Box	-----
3	Clothes		Medium Box	-----
4	Kitchenware		Book/Small Box	-----
5	Kitchenware		Book/Small Box	-----
6	Suitcase		Wrapped	-----
7	Clothes		Medium Box	-----
8	Bags		Medium Box	-----
9	Clothes		Medium Box	-----
10	Clothes		Medium Box	-----
11	Mattress		Wrapped	-----
12	Mattress		Wrapped	-----
13	Clothes		Medium Box	-----
14	Kitchenware		Book/Small Box	-----
15	Kitchenware		Book/Small Box	-----
16	Shoes		Medium Box	-----
17	Clothes		Medium Box	-----
18	Picture		Standup Box	-----
19	Pillows		Large	-----
20	Chair, Arm		Wrapped	-----
21	Chair, Arm		Wrapped	-----
22	Chair		Wrapped	-----
23	Chair		Wrapped	-----
24	Chair		Wrapped	-----

Owner Signature



Company's Signature






A. UNIVERS TRANSIT LTD.

BECAUSE WE CARE...

25	Chair		Wrapped	-----
26	Chair		Wrapped	-----
27	Chair		Wrapped	-----
28	Chair		Wrapped	-----
29	Chair		Wrapped	-----
30	Chair		Wrapped	-----
31	Chair		Wrapped	-----
32	Blankets		Wrapped	-----
33	Clothes		Medium Box	-----
34	Office Supplies		Medium Box	-----
35	Office Supplies		Medium Box	-----
36	Blankets		Wrapped	-----
37	Clothes		Medium Box	-----
38	Picture		Standup Box	-----
39	Picture		Standup Box	-----
40	Glassware		Medium Box	-----
41	Office Supplies		Medium Box	-----
42	Office Supplies		Medium Box	-----
43	Glassware		Medium Box	-----
44	Glassware		Medium Box	-----
45	Decorations		Wrapped	-----
46	Glassware		Medium Box	-----
47	Kitchenware		Book/Small Box	-----
48	Kitchenware		Book/Small Box	-----
49	Kitchenware		Book/Small Box	-----
50	Kitchenware		Book/Small Box	-----
51	Kitchenware		Book/Small Box	-----
52	Kitchenware		Book/Small Box	-----
53	Statue		Wrapped	-----
54	Picture		Standup Box	-----
55	Picture		Standup Box	-----
56	Picture		Standup Box	-----
57	Picture		Standup Box	-----
58	Picture		Standup Box	-----

Owner Signature  _____

Company's Signature  _____




A. UNIVERS TRANSIT LTD.


BECAUSE WE CARE...

59	Picture		Standup Box	-----
60	Picture		Standup Box	-----
61	Picture		Standup Box	-----
62	Picture		Standup Box	-----
63	Picture		Standup Box	-----
64	Picture		Standup Box	-----
65	Picture		Standup Box	-----
66	Picture		Standup Box	-----
67	Shoes		Medium Box	-----
68	Towels		Medium Box	-----
69	Clothes		Medium Box	-----
70	Clothes		Medium Box	-----
71	Clothes		Medium Box	-----
72	TV		Wrapped	-----
73	Statue		Wrapped	-----
74	Chest (Part of)		Wrapped	-----
75	Statue		Wrapped	-----
76	Picture		Standup Box	-----
77	Picture		Standup Box	-----
78	Picture		Standup Box	-----
79	Picture		Standup Box	-----
80	Picture		Standup Box	-----
81	Closet		Wrapped	-----
82	Picture		Standup Box	-----
83	Chest		Wrapped	-----
84	Clothes		Medium Box	-----
85	Picture		Standup Box	-----
86	Office Supplies		Medium Box	-----
87	Chest		Wrapped	-----
88	Table (Part of)		Wrapped	-----
89	Bed (Part of)		Wrapped	-----
90	Office Supplies		Medium Box	-----
91	Bed		Wrapped	-----
92	Bed		Wrapped	-----
93	Picture		Standup Box	-----
94	Table (Part of)		Wrapped	-----
95	Table (Part of)		Wrapped	-----
96	Table (Part of)		Wrapped	-----

Owner Signature



Company's Signature







A. UNIVERS TRANSIT LTD.

Because we care...

97	Top Table		Wrapped	-----
98	Decorations		Wrapped	-----
99	Kitchenware		Book/Small Box	-----
100	Decorations		Wrapped	-----
101	Picture		Standup Box	-----
102	Top Table		Wrapped	-----
103	Bicycle		Wrapped	-----
104	Decorations		Wrapped	-----
105	Decorations		Wrapped	-----
106	Table (Part of)		Wrapped	-----
107	Rugs, Large Roll or Pad		Wrapped	-----
108	Sofa		Wrapped	-----
109	Sofa		Wrapped	-----
110	Decorations		Wrapped	-----
111	Table (Part of)		Wrapped	-----
112	Stand		Wrapped	-----
113	Table part	PBO		
114	Books	PBO		
115	Glassware	PBO		
116	Kitchenware	PBO		

Total Number of Packages: 116

Owner Signature  _____

Company's Signature  _____



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) BASSUK, ANGEL B.		2. IMPORTER'S DATE OF BIRTH 02/02/1944	3. IMPORTER'S DATE OF ARRIVAL 5/30/2021
4. IMPORTER'S U.S. ADDRESS 1720 MAPLE AVE - Apt 950 EVANSTON, IL 60101		5. IMPORTER'S PORT OF ARRIVAL OHARE AIRPORT	
6. NAME OF ARRIVING VESSEL CARRIER AND FLIGHT/TRAIN			
7. NAME(S) OF ACCOMPANYING HOUSEHOLD MEMBERS (wife, husband, minor children, etc.) RAQUEL BASSUK			
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)
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 type="checkbox"/> is <input checked="" type="checkbox"/> was	A. NAME OF COUNTRY ISRAEL	B. LENGTH OF TIME 4 Yr. 4 Mo.
C. RESIDENCY STATUS UPON MY/OUR ARRIVAL ("X" One) <input checked="" 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):		
A. Applicable to RESIDENT and NONRESIDENT <input checked="" 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 checked="" 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)		C. Applicable to NONRESIDENT ONLY <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) 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)
B. Applicable to RESIDENT ONLY <input checked="" type="checkbox"/> All personal effects for which free entry is sought were taken abroad by me or for my account. (9804.00.45, HTSUSA)		

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:

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.)

A. For U.S. Personnel, Evacuees, Residents and Non-Residents <input type="checkbox"/> (1) Articles for the account of other person. <input type="checkbox"/> (2) Articles for sale or commercial use. <input type="checkbox"/> (3) Firearms and/or ammunition. <input type="checkbox"/> (4) Alcoholic articles of all types or tobacco products. <input type="checkbox"/> (5) Fruits, plants, seeds, meats, or birds. <input type="checkbox"/> (6) Fish, wildlife, animal products thereof.		B. For Residents and Non-Residents ONLY <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.	
C. For Resident ONLY <input type="checkbox"/> (9) Personal effects acquired abroad. <input checked="" 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 name, first, and middle)

2. DATE OF BIRTH

02/02/1944

3. CITIZENSHIP

USA

4. PASSPORT (Country and number)

5. SOCIAL SECURITY NUMBER

048-48-5608

6. RESIDENT ALIEN NO.

7. U.S. ADDRESS

1720 MAPLE AVE - Apt 950
EVANSTON, IL 60201

10. EMPLOYER

RETIRED

11. POSITION WITH COMPANY

8. FOREIGN ADDRESS

15 ELYAHU SHAMA'A Apt 2
JERUSALEM, ISRAEL

12. LENGTH OF EMPLOYMENT

9. REASON FOR MOVING

PERSONAL

13. NATURE OF BUSINESS

NAME AND TELEPHONE OF COMPANY OFFICIAL
14. WHO CAN VERIFY ABOVE INFORMATION

NAME AND ADDRESS OF FREIGHT FORWARDERS,
15. PACKERS AND SHIPPING AGENTS

SHIPMENT ITINERARY
16. PACKERS AND SHIPPING AGENTS

17. CERTIFICATION

A. Authorization Agent

B. Importer

(check one)

18. SIGNATURE

