

Shipper:

A. UNIVERS TRANSIT LTD. C/O
LAURA ALFANDARI MILMEISTER
MEVO HAOLE 2,13
JERUSALEM

Carrier's Reference:
89997681SWB-No.:
HLCUTLV220407340Page:
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Export References:

Consignee:

PALMERS RELOCATIONS
62-68 HUME ROAD, LAVERTON NORTH
VIC. 3026, AUSTRALIA
ATTN:MICHAEL BREWER
E:MBREWER@PALMERSRELOCATIONS.COM.AU

Forwarding Agent:

Notify Address (Carrier not responsible for failure to notify):

PALMERS RELOCATIONS
62-68 HUME ROAD, LAVERTON NORTH
VIC. 3026, AUSTRALIA
ATTN:MICHAEL BREWER
E:MBREWER@PALMERSRELOCATIONS.COM.AU

Consignee's Reference:

Place of Receipt:

Vessel(s):

YM WINNER

Voyage-No.:

036E

Place of Delivery:

Port of Loading:

ASHDOD

Port of Discharge:

MELBOURNE

Container Nos., Seal Nos.; Marks and Nos.	Number and Kind of Packages, Description of Goods	Gross Weight:	Measurement:
RFCU 2209510 SEAL: 1541136	1 CONT. 20'X8'6" GENERAL PURPOSE CONT. 77 PACKAGES OF PERSONAL EFFECTS	SLAC* 2300.0 KG	23.000 MTQ

*SLAC = Shipper's Load, Stow, Weight and Count

SHIPPED ON BOARD, DATE : 16/MAY/2022
PORT OF LOADING: ASHDOD
VESSEL NAME: YM WINNER VOYAGE: 036E

FREIGHT PREPAID

EXPRESS BILL OF LADING..

Shipper's declared Value [see clause 7(2) and 7(3)]

Total No. of Containers received by the Carrier: 1 Packages received by the Carrier:

Movement:

FCL/FCL

Currency:

Charge	Rate	Basis	aWt/Vol/Val	P/C	Amount

Above Particulars as declared by Shipper. Without responsibility or warranty as to correctness by Carrier [see clause 11]

RECEIVED by the Carrier from the Shipper in apparent good order and condition (unless otherwise noted herein) the total number or quantity of Containers or other packages or units indicated in the box opposite entitled "Total No. of Containers/ Packages received by the Carrier" for Carriage subject to all the terms and conditions hereof (INCLUDING THE TERMS AND CONDITIONS ON THE REVERSE HEREOF AND THE TERMS AND CONDITIONS OF THE CARRIER'S APPLICABLE TARIFF) from the Place of Receipt or the Port of Loading, whichever is applicable, to the Port of Discharge or the Place of Delivery, whichever is applicable. In accepting this Sea Waybill the Merchant expressly accepts and agrees to all its terms and conditions whether printed, stamped or written, or otherwise incorporated, notwithstanding the non-signing of this Sea Waybill by the Merchant.

Place and date of issue:

TEL AVIV 16/MAY/2022

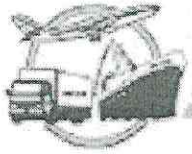
Freight payable at:

PREPAID

FOR ABOVE NAMED CARRIER
CARGO MARINE LTD. (AS AGENT)

Total Freight Prepaid	Total Freight Collect	Total Freight

Cont/Seals/Marks	Packages/Description of Goods	Weight	Measure
CHARGE	RATE BASIS W/M/V CURR	PREPAID	COLLECT
EQPT TRANSFER ORIG		X	
THC ORIGIN		X	
CONGEST.SURCH.ORIG		X	
MARINEFUEL RECOVER		X	
WAR RISK SURCHARGE		X	
DOCUMENT FEE		X	
THC DESTINATION			X
DEST.DOCUMENT FEE			X
EQUIPM.MAINTEN.FEE			X
LUMPSUM		X	



A. UNIVERS TRANSIT LTD.

BECAUSE WE CARE...

Shipper Name: Laura Milmeister
Packing Job Date: 03 May 2022
Origin Address: Israel
Destination Address: Australia

PACKING INVENTORY

No.	Description	Comment	Box Type	Room
1	Clothes		Medium Box	-----
2	Clothes		Medium Box	-----
3	Clothes		Medium Box	-----
4	Books		Book/Small Box	-----
5	Books		Book/Small Box	-----
6	Books		Book/Small Box	-----
7	Books		Book/Small Box	-----
8	Books		Book/Small Box	-----
9	Books		Book/Small Box	-----
10	Suitcase		Wrapped	-----
11	Picture		Standup 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	Glassware		Medium Box	-----
19	Glassware		Medium Box	-----
20	Clothes		Medium Box	-----

Owner Signature



Company's Signature







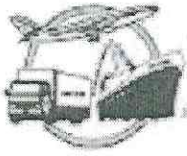
A. UNIVERS TRANSIT LTD.

Because We Care...

21	Clothes		Medium Box	-----
22	Office Supplies		Medium Box	-----
23	Office Supplies		Medium Box	-----
24	Chest		Wrapped	-----
25	TV		Wrapped	-----
26	Chest (Part of)		Wrapped	-----
27	Stand		Wrapped	-----
28	Sofa		Wrapped	-----
29	Refrigerator		Wrapped	-----
30	Decorations		Wrapped	-----
31	Office Supplies		Medium Box	-----
32	Printer		Wrapped	-----
33	Guitar		Wrapped	-----
34	Decorations		Wrapped	-----
35	Ladder		Wrapped	-----
36	Picture		Standup Box	-----
37	Picture		Standup Box	-----
38	Metal Shelves		Wrapped	-----
39	Metal Shelves		Wrapped	-----
40	Metal Shelves		Wrapped	-----
41	Rugs, Large Roll or Pad		Wrapped	-----
42	Sofa		Wrapped	-----
43	Sofa		Wrapped	-----
44	Sofa		Wrapped	-----
45	Decorations		Wrapped	-----
46	Decorations		Wrapped	-----
47	Clothes		Medium Box	-----
48	Clothes		Medium Box	-----
49	Kitchenware		Book/Small Box	-----
50	Kitchenware		Book/Small Box	-----
51	Kitchenware		Book/Small Box	-----
52	Kitchenware		Book/Small Box	-----
53	Kitchenware		Book/Small Box	-----
54	Kitchenware		Book/Small Box	-----

Owner Signature 

Company's Signature 



A. UNIVERS TRANSIT LTD.

Deposits are safe...


55	Kitchenware		Book/Small Box	-----
56	Kitchenware		Book/Small Box	-----
57	Kitchenware		Book/Small Box	-----
58	Washing Machine		Wrapped	-----
59	Dryer		Wrapped	-----
60	Chest		Wrapped	-----
61	Office Supplies		Medium Box	-----
62	Office Supplies		Medium Box	-----
63	Office Supplies		Medium Box	-----
64	Mattress		Wrapped	-----
65	Bed		Wrapped	-----
66	Decorations		Wrapped	-----
67	Shoes		Medium Box	-----
68	Office Supplies		Medium Box	-----
69	Bookcase		Wrapped	-----
70	Guitar		Wrapped	-----
71	Office Supplies		Medium Box	-----
72	Clothes		Medium Box	-----
73	Umbrella		Wrapped	-----
74	Decorations		Wrapped	-----
75	Decorations		Wrapped	-----
76	Chest		Wrapped	-----
77	Chair		Wrapped	-----


Total Number of Packages: 77

Used Boxes:

Packages Summary

Box Name	Quantity
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Owner Signature 

Company's Signature 

Section Seven

Do your unaccompanied effects contain any of the following goods, subject to animal biosecurity laws, or wildlife export and import laws?

Animals alive or dead including mammals, reptiles, fish, birds, insects or parts thereof or Animal Products including: feathers, skins, horns, shells, hatching eggs, semen or embryos.

Yes No

If yes, please provide a list of the goods **A few small off-cuts of white fur (treated/ready for sewing into garment) and a fur rabbit scarf - family hand-me-downs**

Food of any kind (including any edible item) such as:

meat, poultry, eggs, dairy products, baby food, spreads and sauces, beverages and non-alcoholic drinks.

Yes No

If yes, please provide a list of the goods

Equipment used with horses or other animals including:

saddles, harnesses, whips, collars, brushes, blankets or rugs used as animal bedding.

Yes No

If yes, please provide a list of the goods

Biological specimens including:

vaccines, cultures, blood, cell samples or cell lines, semen or embryos.

Yes No

If yes, please provide a list of the goods

Section Eight

Do your unaccompanied effects contain any of the following goods, subject to plant biosecurity laws?

Plants or parts of plants live or dead including:

fruits, nuts, seeds, bulbs, leaves, wooden articles or articles made of plant material, cuttings, flowers, mushrooms, fungi, straw, bamboo, herbs or teas.

Yes No

If yes, please provide a list of the goods

Furniture or other articles of wood, cane or bamboo.

Yes No

If yes, please provide a list of the goods **Solid wood buffet (sealed lacquer), armchair with wooden legs/arms (sealed lacquer), TV stand (sealed lacquer), a jewellery box (sealed lacquer), wooded blocks for baby (painted), 2 guitars,**

Soil or earth or goods containing soil, earth, rock or mineral samples.

sealed lacquer Chinese medicine cabinet, wooden jacket hanger (lacquered). NO cane or bamboo.

Yes No

If yes, please provide a list of the goods


Straw or wood packing material other than wood shavings or sawdust.

Yes No

Egg or fruit cartons used in packing.

Yes No

I declare that the above particulars are to the best of my knowledge true and correct and that I have understood the questions contained in this form and the answers to those questions are true and correct.

Signature of owner 

Date **03/02/2022**

FOR OFFICIAL USE ONLY

Goods declared

Action taken

ICD number:

Section Four

Do your unaccompanied effects contain any of the following goods?

Australian and/or Foreign currency in the amount of \$10,000 Australian or more.

Yes No

If yes, please list the amount(s) in Australian dollars

Medicines (whether prescribed by a medical practitioner or not) including but not limited to: herbal.

Yes No

If yes, please provide a list of the goods

Section Five

Do your unaccompanied effects contain any of the following goods? If you tick 'yes' to any question, describe the goods in the table below.

Cigarettes, cigars or tobacco

Yes No

Alcoholic liquor including: spirits, wine or beer.

Yes No

Motor vehicle, motorcycle, trailers or watercraft.

Yes No

Goods belonging to any person other than you or those who accompanied you on your arrival in Australia.

Yes No

Goods for commercial purposes, including goods for sale, lease, hire or exchange.

Yes No

Other goods owned by you for less than 12 months.

Yes No

If insufficient space, attach a separate sheet

Description	Price or estimated price \$AUS	Date of purchase


IMPORTANT NOTICE: Any goods owned by you for less than 12 months must be declared. Such goods will be assessed for duty and taxes. Penalties exist for not declaring such goods. For further information please visit our website at www.border.gov.au

Section Six

Within one month prior to shipping these effects to Australia, did you or any member of your family who arrived or will arrive with you, visit a place where farm animals are kept, including farming communities, research farms, sanctuaries and sale yards or visit an abattoir or any meat processing plant?

Yes No

I declare that the above particulars are to the best of my knowledge true and correct and that I have understood the questions contained in this form and the answers to those questions are true and correct.

Signature of owner  Date **03/02/2022**

Important

You must answer each of the following questions by placing a tick (✓) in the appropriate boxes. If you mark YES in any box in sections three to eight, or if you are in doubt whether any particular effects should be declared, please give details in the space provided under each question or on a separate attachment if the space is insufficient. Unaccompanied effects may be examined. Please ensure that keys are available at the time of clearance.

Section One

Have you come or are you coming to Australia

As a tourist only? →

To take up temporary residence only? →

To resume permanent residence or as a returning Australian citizen?

To take up permanent residence for the first time?

As an Australian citizen residing overseas, returning temporarily?

Section Two

Did you pack the goods yourself?

Yes

No →

Are you fully aware of the contents of the packages?

Yes

No →

Do the packages contain goods belonging to any person other than you or those who accompanied you on your arrival in Australia?

Yes →

<input type="text" value="Name"/>	<input type="text" value="Passport number"/>	<input type="text" value="Relationship to you"/>
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No

Section Three

Do your unaccompanied effects contain any of the following restricted goods?

Drugs of any kind including, but not limited to: DHEA, narcotics, hallucinogens, amphetamines, barbiturates, tranquillisers, steroids or performance enhancing drugs.

Yes No

Weapons including, but not limited to: firearms or parts (including air pistols and air rifles), ammunition, replica firearms, spring bladed knives, daggers, knuckle dusters or martial arts equipment.

Yes No


Articles manufactured from wildlife including, but not limited to: reptiles/snakes, elephants, rhinoceri, members of the cat family, whales, dolphins, zebras, antelope, deer or coral.

Yes No

Material which is likely to cause offence to a reasonable adult. This may include, but is not limited to: child pornographic material, child abuse material, material which may promote, incite or instruct in matters of crime or violence or misuse of a drug, or sexual material (including bestiality).

Yes No

I declare that the above particulars are to the best of my knowledge true and correct and that I have understood the questions contained in this form and the answers to those questions are true and correct.

Signature of owner 

Date
03/02/2022



Australian Government
Department of Immigration
and Border Protection
Department of Agriculture

UNACCOMPANIED PERSONS EFFECTS STATEMENT

- This is a legally binding document and may be used as evidence.
- This statement must be completed in English (block letters), with all errors and alterations to be initialled.

WARNING

Do not carry drugs. Penalties for drug offences in Australia are severe. A false or misleading statement to an officer of Customs is an offence and may involve heavy penalties, including forfeiture of any goods concerned.

NOTICE

The *Privacy Act 1988* says we must tell you why we are collecting this information, how we will use it and whether you have to give it to us. This information is required to ensure travellers comply with customs, Biosecurity, Health, Wildlife and Currency laws.

We require this information under the *Customs Act 1901*, the *Quarantine Act 1908*, the *Environment Protection and Biodiversity Conservation Amendment (Wildlife Protection) Act 2001* and the *Financial Transaction Reports Act 1988*. The Department of Immigration and Border Protection also needs the information to calculate the right amount of duties and taxes. Any questions you do not answer will be asked by an officer of Customs or an officer of the Department of Agriculture. The Department of Immigration and Border Protection and Department of Agriculture are not permitted to disclose this information or any supplementary information you give, except when authorised or required by law.

Please complete the following details

Given names LAURA		Family name MILMEISTER	
Address and telephone number of intended or actual Australian residential address 1/101 CLARENCE STREET, SOUTH CAULFIELD VIC 3162			Date of birth 05/01/1985
Sex <input type="checkbox"/> Male <input checked="" type="checkbox"/> Female	Passport number N8040901	Country of issue AUSTRALIA	
Persons covered by this statement: <input checked="" type="checkbox"/> Myself <input checked="" type="checkbox"/> Spouse		Name of spouse OLIVIER RAFAEL RUIZ ALFANDARI	
Spouse passport number 21DF91969		Number of children under 18 years of age 1	

How I arrived or intend to arrive in Australia

On (airline flight number or ship name) Emirates 408	At (port or airport) Melbourne
Date, or estimated date, of arrival 11 MAY 22	Country of departure ISRAEL

For returning residents only

Other countries visited	Period of absence from Australia
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How my personal effects arrived or will arrive

By Mail; or By Air; or By Sea (if by air or sea then complete below)

The consigned to me have arrived or are due to arrive:

On (airline flight number or ship name)	At (port or airport)	Date, or estimated date, of arrival
Container number	Sea Bill or Air Waybill number	Name of local business handling your personal effects PALMERS

Clearing your personal effects

You may clear your personal effects or nominate a representative such as a freight forwarder, customs broker, friend or relative to act on your behalf. If you wish to nominate somebody else, you must fill in the details of your nominee in the space provided below.

Family name	Given names			
Address	Phone number			
Your nominee will need to produce the following forms of identification when clearing your goods through customs.				
Driver's licence number	Place of issue	and	Passport number	Country of issue

Declaration

I declare that the above particulars are to the best of my knowledge true and correct.

Signature of owner 	Date 03/02/2022
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