

Shipper

GOFFER YAIRA  
BEN YEHUDA 92  
HERTZLIYA

**LINER BILL OF LADING**  
COPY NON-NEGOTIABLE

SMRK 2042933  
Reference No.

4020129

Consignee

GOFFER YAIRA  
18019 VERTURA BLVD  
ENCINO, CA 91316  
USA  
TEL: +310-838943

CUSTOMS & FORWARDING AGENCY

**OSHFIR**  
IMPORT & EXPORT LTD

5, PAL-YAM ST., HAIFA 33095 ISRAEL  
TEL. 04-8672270 FAX. 04-8641670

Notify address

FLATRATE INTERNATIONAL  
27 BRUCKNER BLVD  
BRONX, NY 10454  
TEL: 7184755786 EXT 137

For delivery apply to:

Pre-carriage by FLATRATE INTERNATIONAL Place of receipt by pre-carrier\*

Vessel ZIM QINGDAO Port of loading V100 HAIFA, ISRAEL  
Port of discharge NEW YORK Place of delivery by on carrier\*

SEAMAR FREIGHT INTERNATIONAL\*\*  
167-14 146 ROAD,  
JAMAICA, NY 11434 USA  
TEL: 718-5535333 FAX: 718-5530708

Marks and Nos.

Number and kind of packages; description of goods

Gross weight

Measurement

GOFFER YAIRA  
BEN HEHUDA 92  
HERTZLIYA

2 SKIDS

SLAC: 2 SKIDS OF USED  
HOUSEHOLD GOODS  
SLAC: 69 PCKGS  
HS CODE 9905.00  
\*\*EXPRESS B/L\*\*

1,089.00

11.120

Copy for testing

Particulars furnished by the Merchant

Freight details, charges ets.

Stuft. Cont. No. ZCSU-777980-2  
CFS

**BILL OF LADING**

RECEIVED by the Carrier the Goods as specified above in apparent order and condition unless otherwise stated, to be transported to such place as agreed, authorised or permitted herein and subject to all the terms and conditions appearing on the front and reverse of this Bill of Lading to which the Merchant agrees by accepting this Bill of Lading, any local privileges and customs notwithstanding.

The particulars given above as stated by the shipper and the weight, measure, quantity, conditions, contents and value of the Goods are unknown to the Carrier.

In WITNESS, whereof one (1) original BILL of Lading has been signed it not otherwise stated hereafter, the same being accomplished the other(s), if any to be void, If required by the Carrier one (1) original Bill of Lading must be surrendered duly endorsed in exchange for the Goods or delivery order.

The contract evidenced by or contained in this bill of Lading is governed by the law of Israel and any claim of dispute arising hereunder or on connection herewith shall be determined by the courts in Haifa and no other Courts.

(Terms to continue on back hereof)

Excess value declaration refer to clause 6 (4) (B) + (C) on reverse side.

Date	Shipped on board Signed by	Freight payable at	Place and date issue
12/08/22		Number of original Bs/L PREPAID	Signature 12/08/22





# PACKING INVENTORY

Shipper Name: GOFFER YAIRA  
 Packing Job Date: 17 Jun 2022  
 Origin Address: Israel  
 Destination Address: United States



## Packed Items

Package#	Item	Comment	Wrapping	Room
1	Chair, Arm		Wrapped	-----
2	Mirror		Wrapped	-----
3	Glassware		Medium Box	-----
4	Glassware		Medium Box	-----
5	Glassware		Medium Box	-----
6	Breakfast Table with Glass Top		Wrapped	-----
7	Breakfast Table with Glass Top		Wrapped	-----
8	Breakfast Table with Glass Top		Wrapped	-----
9	Breakfast Table with Glass Top		Wrapped	-----
10	Breakfast Table with Glass Top		Wrapped	-----
11	Breakfast Table with Glass Top		Wrapped	-----
12	Coffee Table		Wrapped	-----
13	Coffee Table		Wrapped	-----
14	Lamp, Floor or Pole		Wrapped	-----
15	Mirror		Wrapped	-----
16	Picture		Flat Box	-----
17	Picture		Flat Box	-----
18	Glassware		Medium Box	-----
19	Glassware		Medium Box	-----
20	Bags		Medium Box	-----
21	Bags		Medium Box	-----
22	Clothes		Medium Box	-----
23	Clothes		Medium Box	-----
24	Clothes		Medium Box	-----
25	Clothes		Medium Box	-----

26	Clothes		Medium Box	-----
27	Clothes		Medium Box	-----
28	Clothes		Medium Box	-----
29	Decorations		Wrapped	-----
30	Decorations		Wrapped	-----
31	Decorations		Wrapped	-----
32	Decorations		Wrapped	-----
33	Decorations		Wrapped	-----
34	Decorations		Wrapped	-----
35	Decorations		Wrapped	-----
36	Decorations		Wrapped	-----
37	Decorations		Wrapped	-----
38	Decorations		Wrapped	-----
39	Decorations		Wrapped	-----
40	Decorations		Wrapped	-----
41	Umbrella		Wrapped	-----
42	Kitchenware		Book/Small Box	-----
43	Kitchenware		Book/Small Box	-----
44	Kitchenware		Book/Small Box	-----
45	Kitchenware		Book/Small Box	-----
46	Kitchenware		Book/Small 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	Kitchenware		Book/Small Box	-----
54	Kitchenware		Book/Small Box	-----
55	Kitchenware		Book/Small Box	-----
56	Kitchenware		Book/Small Box	-----
57	Kitchenware		Book/Small Box	-----
58	Kitchenware		Book/Small Box	-----
59	Kitchenware		Book/Small Box	-----
60	Picture		Flat Box	-----
61	Glassware		Medium Box	-----
62	Glassware		Medium Box	-----
63	Glassware		Medium Box	-----
64	Glassware		Medium Box	-----
65	Glassware		Medium Box	-----
66	Glassware		Medium Box	-----
67	Glassware		Medium Box	-----
68	Maniken		Wrapped	-----
69	Decorations		Wrapped	-----

**Total Number of Packages: 69**

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### Used Boxes Count

Box Type	Quantity
Book/Small Box	18
Flat Box	3
Medium Box	21
Wrapped	27

To :  
Customs Authorities  
B.G. Airport / Ashdod / Haifa Port.

Date : \_\_\_\_\_

Dear Madam / Sir.

Re : Declaration for Personal Effects Shipping of Overseas.

- X 1. I hereby am sending my personal effects overseas for the following reasons :
- Personal reasons.     Employment reasons.     Studies reasons.  
 Other reasons : \_\_\_\_\_
2. I am remaining and sending personal effects to :     Family.     Others.  
Detail : \_\_\_\_\_
3. I was born in Israel and declare that I     Did /  Did not use returning citizen rights during the last six years.
4. Hereby I declare that I made Aliya to Israel on \_\_\_\_\_ and     Did /  Did not use Oleh Hadash rights during the last six years.
- X 5. Reciever's full name : Goffer Yaira
- Reciever's full adress : 18019 Ventura Blvd  
Encino, CA 91316 USA
- Tel. no. incl. local code : +310-8838943 / 052-7797971
- Fax no. incl. local code : \_\_\_\_\_

Hereby I declare that all above details are true and correct, and goods are send for personal use only.

- X Goffer Yaira 0725230-7 499460577 01/7/22 ~~Goffer~~
- Full name                      I.D. No.                      Passport No.                      Date                      Signature
- X Full address in Israel : Ben yehouda 92 Apts Herzeliyah



A. UNIVERS TRANSIT Ltd.

## CONTACT INFORMATION FORM

When you ask us to take care of your relocation we kindly request you to fill in this form and return it to us.

Client <i>Goffer Yaira</i>	Account	Job number
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Loading address / details <i>Ben yehouda 92, Herzeliha</i>	Address of destination / details <i>18019 Ventura Blvd. Encino, CA 91316 USA</i>
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Phone 1	<i>052-7797971</i>	Phone 1	<i>+310-8838943</i>
Phone 2	<i>yairagoffer@hotmail.com</i>	Phone 2	<i>yairagoffer@hotmail.com</i>
Phone cell		Phone cell	
Email ( very important)		Email ( very important)	
Date you depart from this address		Date you arrive at this address	

It is very important that we ( or our agent) know where we can reach you during transit of your shipment. Please advise details below. You can, for instance, also give us the address of an employer or relatives where you will be staying.

Contact address / details 1)	Contact address / details 2)
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Phone 1		Phone 1	
Phone 2		Phone 2	
Phone cell		Phone cell	
Email ( very important)		Email ( very important)	
We can reach you at this address from - till		We can reach you at this address from - till	

Request date(s) of loading	
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Timing of shipping of your goods	<b>A.S.A.P. AFTER PACKING</b>	<b>AT MY CALL</b>	<b>ON A CERTAIN DATE:</b>
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Service requested		<b>Standard-SERVICE INTO NEW RESIDENCE</b>	<b>FULL-SERVICE INTO NEW RESIDENCE</b>
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Place	Date	Signature
ID/ Passeport #	<i>6/7/22</i>	<i>Goffer</i>



**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) Goffer Yaira  
(Full name of Shipper)

Residing at (X) 18019 Ventura Blvd. Encino, CA 91316  
(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) Goffer Yaira  
(Full name of shipper)

has caused these presents to be signed (X) Goffer DATE (X) 6/7/22  
(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) <i>Goffar Yaira</i>	2. IMPORTER'S DATE OF BIRTH <i>July 21<sup>st</sup> 1944</i>	3. IMPORTER'S DATE OF ARRIVAL
4. IMPORTER'S U.S. ADDRESS <i>18019 Ventura Blvd Encino, CA 91316 USA</i>	5. IMPORTER'S PORT OF ARRIVAL	
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	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 type="checkbox"/> is <input type="checkbox"/> was	A. NAME OF COUNTRY	B. LENGTH OF TIME 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><b>A. Applicable to RESIDENT AND NONRESIDENT</b></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>B. Applicable to RESIDENT ONLY</b></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><b>C. Applicable to NONRESIDENT ONLY</b></p> <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)</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> |
|--|---|

**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> <p><input type="checkbox"/> (1) Articles for the account of other persons.</p> <p><input type="checkbox"/> (2) Articles for sale or commercial use.</p> <p><input type="checkbox"/> (3) Firearms and/or ammunition.</p> <p><input type="checkbox"/> (4) Alcoholic articles of all types or tobacco products.</p> <p><input type="checkbox"/> (5) Fruits, plants, seeds, meats, or birds.</p> <p><input type="checkbox"/> (6) Fish, wildlife, animal products thereof.</p> | <p><b>B. For Residents and Non-Residents ONLY</b></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><b>C. For Resident ONLY</b></p> <p><input checked="" 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> |
|--|---|

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.
	clothing furniture shoes kitchenware miscellaneous		

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

2. SIGNATURE 	3. DATE <u>6/7/22</u>
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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).

PART VII -- CBP USE ONLY (Inspected and Released)	1. SIGNATURE OF CBP OFFICIAL	2. DATE
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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) Goffer Yaira

2. Date of Birth July 21<sup>st</sup> 1944 | 3. Citizenship \_\_\_\_\_

4. Passport (Country and Number) US - 499460577

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

7. U.S. Address 18019 Ventura Blvd | 10. Employer \_\_\_\_\_  
Encino, CA 91316 USA

\_\_\_\_\_ | 11. Position with Company \_\_\_\_\_

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

\_\_\_\_\_ | 12. Length of Employment \_\_\_\_\_

\_\_\_\_\_ | 13. Nature of Business \_\_\_\_\_

9. Reason for Moving Relocation

\_\_\_\_\_ | 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 Goffer | Date 6/7/22