

| Shipper's Name and Address MACIAS RAMON ELIPHAT 26 TEL AVIV | | Shipper's Account Number | Not Negotiable Air Waybill Turkish Airlines Istanbul Airport, Turkey Member of I.A.T.A Issued by | | | | | | |
|---|---|--|--|---|--------------------|---------------------------------|---|--|--|
| Consignee's Name and Address MACIAS RAMON 10109 N .FOOTHILL BLVD CUPERTINO 95014 Californi USA | | Consignee's Account Number | Copies 1,2 and 3 of this Air Waybill are originals and have the same validity 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 HEREOF. ALL GOODS MAY BE CARRIED BY ANY OTHER MEANS INCLUDING ROAD OR ANY OTHER CARRIER UNLESS SPECIFIC CONTRARY INSTRUCTIONS ARE GIVEN HEREON BY THE SHIPPER, AND SHIPPER AGREES THAT THE SHIPMENT MAY BE CARRIED VIA INTERMEDIATE STOPPING PLACES WHICH THE CARRIER DEEMS APPROPRIATE. THE SHIPPER'S ATTENTION IS DRAWN TO THE NOTICE CONCERNING CARRIER'S LIMITATION OF LIABILITY. Shipper may increase such limitation at liability by declaring a higher value for carriage and paying a supplemental charge if required. | | | | | | |
| Issuing Carrier's Agent Name and City ALLCARGO LOGISTIC SERVICES LTD 3 HASHARON ST. 7019900 AIRPORT CITY ISRAEL | | Accounting Information GALLAGHER TRANSPORT INTERNATIONAL 433 AIRPORT BLVD .,SUITE 225 BURLINGAME ,CA .94010 T:650-952-3803 E:SYDNEY.SONG@GALLANGHERTRANSPORT.COM | | | | | | | |
| Agent's IATA Code 37-4-7102 | Account No. | | | | | | | | |
| Airport of Departure (addr. of First Carrier) and Requested Routing Tel-Aviv | | Reference Number | Optional Shipping Information | | | | | | |
| To IST | By First Carrier Turkish Airlines | Routing and Destination to SFO by TK to by | Currency USD | CHGS Code PP X | WT/VAL X | Other X | Declared Value for Carriage NVD | Declared Value for Customs NCV | |
| Airport of Destination San Francisco,ca | | Requested Flight/Date 6167/2502 | Amount of Insurance X X X | INSURANCE . If carrier offers Insurance, and each Insurance is requested in accordance with the conditions thereof. Indicate amount to be insured in figures in box marked "Amount of Insurance". | | | | | |
| Handling Information ENVELOPE ATTACHED MARKS AND NUMBERS HS Code:490199 | | | | | | | | | |
| (For USA only):These commodities, technology or software were exported from the United States in accordance with the Export Administration Regulations. Diversion contrary to USA law prohibited. | | | | | | | | SCI | |
| No. of Pieces RCP | Gross Weight | kg lb | Rate Class | Commodity Item No. | Chargeable Weight | Rate | Charge | Total | Nature and Quantity of Goods (incl. Dimensions or Volume) |
| 3 | 164.00 | K | Q | | 202.50 | | | | USED PERSONAL EFFECTS 2 ND NOTIFY ALLIED INTERNATIONAL SAN FRANCISCO , 3146 CORPORATE PLACE , HAYWARD , CA 94545 T:510-7607364 E:TRACY & AISFO .COM E:MARIE & AISFO .COM DIM: 3(90X60X75)CMS AS VOL 202.500 KGS 1.2150 CBM Inv.No:307114 |
| 3 | 164.00 | | | | | | | | |
| Prepaid | | Weight Charge | | Collect | | Other Charges | | | |
| Valuation Charge | | Tax | | Total Other Charges Due Agent | | Total Other Charges Due Carrier | | Total Prepaid | |
| Total Prepaid | | Total Collect | | Currency Conversion Rates | | CC Charges in Dest. Currency | | Signature of Shipper or his Agent | |
| For Carriers Use only at Destination | | Charges at Destination | | Total Collect Charges | | Executed on (date) | | at (place) | |

Shipper certifies that the particulars on the face hereof are correct and that insofar as any part of the consignment contains dangerous goods, such part is properly described by name and is in proper condition for carriage by air according to the applicable Dangerous Goods Regulations.
ALLCARGO LOGISTIC SERVICES LTD /Ofer Haran
REF:84358 JOB:100437

25.02.23 Tel-Aviv
ALLCARGO LOGISTIC SERVICES LTD



PACKING INVENTORY

Shipper Name: Masias Ramon
 Packing Job Date: 06 Feb 2023
 Origin Address: Israel
 Destination Address: United States



Packed Items

| Package# | Item | Comment | Wrapping | Room |
|----------|------------------|------------|----------|-------|
| 1 | Games | | Wrapped | ----- |
| | Clothes | | | |
| | Golf Bag/Clubs | | | |
| | Sports Equipment | | | |
| 2 | Yoga Mat | | Wrapped | ----- |
| | Clothes | | | |
| | Kitchen | | | |
| 3 | Books | | Wrapped | ----- |
| | Shoes | | | |
| | Computer Monitor | apple 3069 | | |

Total Number of Packages: 3

:

Used Boxes Count

| Box Type | Quantity |
|----------|----------|
| Wrapped | 3 |

Shipper Signature on packing

Shipper: Masias Ramon

Foreman Signature on packing

Foreman: max glazer
A. Univers Transit Ltd.

Shipper Signature on delivery

Name: _____
Date _____

Delivery Driver Signature

Name: _____
Company: _____

